250 Eastern Boulevard Mailing: 5662 Route 64 Canandaigua, NY 14424 585-396-2000 585-394-1445 Fax www.roselandwaterpark.com



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3.	
Int Date/Time:	

Roseland Waterpark is an equal opportunity employer. All applicants are considered without regard to race, age, color, gender, ethnic group, national origin, religion, citizenship, marital status, sexual orientation, veteran status, physical or mental disability, or medical condition.

**MAKE SURE YOU SAVE FORM BEFORE SUBMITTING

PERSONAL INFORMATION

Last Name	First Name	MI	Today's Date
Address	٦	Fown/Zip	Are you 18 years old or older? Yes No
Cell Phone Number	Home Phone Number		Are you 15 years old or younger? Yes No
Where did you hear about emp	Email Address:		
Roseland Website	Indeed	Newspaper Ad	
Current/former employee	Friend/family member	Other	

EMPLOYMENT DESIRED

Position Applied for. (Choose at least one)		Start Date:				
•	o work: (circle all Part Time In	that apply) side Outside		ting Hours Are Y	ou Available to W	ork?
Please indicate any day you are UNABLE to work with an "X" below:		Weekend Av	vailability:			
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

EDUCATION

Level	Name and Address	Number of years completed	Major Studies	Degree/Diploma License/Certificate
High School				
College, Vocational, Other				

MILITARY

Branch	Dates of Service	Final Rank	Special Training
	Start Date		
	End Date		

SKILLS

Certificates or Special Training
Computer Skills (hardware/software)
Other Skills, Knowledge, Areas of Expertise
What clubs, organizations, civic or other groups have you been a member in the last five years which are relevant to
his job? (exclude any membership which would reveal race, religion, sex, age, national origin, or ancestry of its members)

EMPLOYMENT HISTORY Please list employment record, starting with the most recent.

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Dates of Employment	Employer Name and Address	Supervisor Name and Job Title	Phone Number
From: To:			
Job Title			Reason for Leaving
Duties, Responsibilities, Promot	ions		
Dates of Employment	Employer Name and Address	Supervisor Name and Job Title	Phone Number
From: To:			
Job Title			Reason for Leaving
Duties, Responsibilities, Promot	ions		
Dates of Employment	Employer Name and Address	Supervisor Name and Job Title	Phone Number
From: To:			
Job Title			Reason for Leaving
Duties, Responsibilities, Promot	ions		

CHARACTER REFERENCES List people who are not related to you and are not previous employers.

Name	Phone Number	Relationship
		Years Known
Name	Phone Number	Relationship
		Years Known
Name	Phone Number	Relationship
		Years Known

GENERAL

Are you currently employed? Yes No		
If yes, may we contact your present employer? Yes No		
Have you ever worked for Bristol Mt., Roseland, or Aerial Park? Yes No. If yes, which dept/year?	1	
Do any relatives currently work for Roseland? Yes No. If yes, which dept?		
Have you ever been convicted of a crime? Yes No. If yes, explain:		
Conviction will not necessarily disqualify and applicant from employment.		
If offered employment, will you be able to provide proof of identity and authorization to work in the U.S.?	Yes	No
If under 18 years old, will you be able to provide working papers from your school? Yes No		

APPLICANT STATEMENT

I understand and agree to the following:

This application is not a contract of employment.

Should the employer hire me and should any of the information I have given in this application be found false, misleading, or incomplete, I shall be subject to dismissal.

The employer follows an "at will" employment policy, meaning the employer or I may terminate employment at any time for any reason consistent with the applicable law.

All hired persons must provide proof of identity and authorization to work in the U.S. Failure to produce such proof will result in denial of employment.

I authorize investigation of all statements given on this application. The employer may contact any educational institution, reference, or employer listed on this application, except my current employer if so noted, to verify the information I have given. I authorize those employers to disclose to Roseland Waterpark all records pertinent to my employment with them.

I certify that all the information in this application is complete and true.

Signature of Applicant

Date

NEW APPLICATIONS WILL REMAIN ON FILE FOR THE CURRENT HIRING SEASON ONLY