



OFFICE  
USE ONLY

## APPLICATION FOR EMPLOYMENT

- You must be at least 16 years old to work at Quassy.
- You must be willing to work weekends and Holidays during the summer.

### PERSONAL INFORMATION

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SOCIAL SECURITY NO.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

CELL PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E Mail Address: \_\_\_\_\_

DATE YOU CAN START: \_\_\_\_\_ END: \_\_\_\_\_ TIME OFF: \_\_\_\_\_

**Are you 18 years of age or older:** YES \_\_\_\_\_ NO \_\_\_\_\_

**EMPLOYMENT DESIRED:** \_\_\_\_\_

**Skilled Positions:** Mechanic \_\_\_\_\_, Lifeguard \_\_\_\_\_, *I have all certifications for Lifeguarding;* Yes \_\_\_\_\_ No \_\_\_\_\_

**Returning:** Yes / No If yes, what department did you work in: \_\_\_\_\_

### SCHOOLING

HIGH SCHOOL: \_\_\_\_\_ YEARS ATTENDED: \_\_\_\_\_

COLLEGE: \_\_\_\_\_ YEARS ATTENDED: \_\_\_\_\_

TRADE SCHOOL: \_\_\_\_\_ YEARS ATTENDED: \_\_\_\_\_

### FORMER EMPLOYMENT

**THIS IS MY FIRST JOB: Yes / No**

NAME OF COMP: \_\_\_\_\_ POSITION: \_\_\_\_\_

SALARY: \_\_\_\_\_ START: \_\_\_\_\_ END: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_

NAME OF COMP: \_\_\_\_\_ POSITION: \_\_\_\_\_

SALARY: \_\_\_\_\_ START: \_\_\_\_\_ END: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_

### REFERENCES

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ YEAR KNOWN: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ YEAR KNOWN: \_\_\_\_\_

### AUTHORIZATION:

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION. QUASSY AMUSEMENT PARK AND AUTHORIZED AGENTS SHALL BE ENTITLED, WITHOUT FURTHER CONSENT, TO COPYRIGHT, SELL OR USE IN ANY MANNER, ANY PITCHER, ELECTRONIC PHOTOGRAPHY, OR RECORDING OF MY VOICE, PURSUANT TO MY EMPLOYMENT. I UNDERSTAND THAT THIS APPLICATION IS NOT A PROMISE OR CONTRACT OF EMPLOYMENT. IF EMPLOYED, BY SIGNING BELOW, I AGREE TO COMPLY WITH ALL SAFETY RULES, GROOMING CODES AND ALL OTHER RULES AND REGULATIONS OF QUASSY AMUSEMENT PARK, INC. I ALSO UNDERSTAND AND AGREE THAT MY DUTIES MAY CHANGE FROM TIME TO TIME DURING MY EMPLOYMENT. I ALSO UNDERSTAND I HAVE THE RIGHT TO RESIGN FROM QUASSY AMUSEMENT PARK AT ANY TIME, AT MY DISCRETION AND QUASSY AMUSEMENT PARK HAS THE RIGHT TO TERMINATE ME WITH OR WITHOUT CAUSE AT ANY TIME. IF EMPLOYED AT QUASSY AMUSEMENT PARK, I AGREE TO SUBMIT TO SEARCH OF MY PERSON, PURSE, BAG, LOCKER OR ANY SPACE OCCUPIED OR ASSIGNED TO ME. I ALSO UNDERSTAND THAT ELECTRONIC SURVEILLANCE EQUIPMENT WILL BE PRESENT IN MY WORK AREA AND THAT I MAY BE VIDEO TAPED AS A RESULT OF THE SYSTEM. IF EMPLOYED I UNDERSTAND THAT I AM AN EMPLOYEE AT WILL.

Date: \_\_\_\_\_ Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_