



Calvin Crest Conferences
 45800 Calvin Crest Road, Oakhurst, CA 93644
 (559) 683-4450 Fax (559) 683-7118
 info@calvincrest.com www.calvincrest.com

Application for Employment

****Please use Back Side of Forms if necessary to provide additional information.**

Name/Address/Phone:

Name _____ Today's Date _____

Present Address _____

Home Address (if different from above) _____

Home Phone _____ Work Phone _____ Mobile Phone _____

Email Address _____ Position(s) Applied For _____

How did you learn about us? _____

Education:

High School _____ Years Completed _____ Diploma Received? Yes No (circle one)

Concentration or major area of study _____

School Activities _____

College _____ City, State _____

Degree Received _____ Major/Minor _____

School Activities _____

Graduate or Professional Degree? _____ School, City, State _____

Other _____ Concentration of Study _____

Best time to contact you: _____

If under 18, can you provide required proof of eligibility to work? _____

Have you ever filed an application with us before? _____

Do any of your friends or relatives work here? _____

Are you currently employed? _____

May we contact your current employer? _____

Are you prevented from lawfully becoming employed in this country? _____

Proof of citizenship or immigration status will be required upon employment

Have you been convicted of a crime? If yes please provide details: _____

Date available to work: _____

Are you available to work: Full time _____ Part time _____ Seasonal (summer) _____ Seasonal (school year) _____



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Work History (starting with most recent employment):

Company/Organization _____ From _____ To _____
Address _____ Telephone _____
Position _____ Responsibilities _____
Salary or hourly rate: Beginning _____ Ending _____
Status/Reason for Leaving _____

Company/Organization _____ From _____ To _____
Address _____ Telephone _____
Position _____ Responsibilities _____
Salary or hourly rate: Beginning _____ Ending _____
Status/Reason for Leaving _____

Company/Organization _____ From _____ To _____
Address _____ Telephone _____
Position _____ Responsibilities _____
Salary or hourly rate: Beginning _____ Ending _____
Status/Reason for Leaving _____

Company/Organization _____ From _____ To _____
Address _____ Telephone _____
Position _____ Responsibilities _____
Salary or hourly rate: Beginning _____ Ending _____
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Comments: Include explanation of any gaps in employment.



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List any specialized training, apprenticeship, skills or extra-curricular activities:

Describe any job-related training, or training received in the United States military:

List professional, trade, business or civic activities and offices held:

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status

Additional information and other qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience

Specialized Skills

- | | | |
|---|--|---|
| <input type="checkbox"/> PC/MAC | <input type="checkbox"/> Spreadsheet | <input type="checkbox"/> Word Processing |
| <input type="checkbox"/> Grounds keeping/landscaping | <input type="checkbox"/> Small engine repair | <input type="checkbox"/> Custodial/maintenance |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Plumbing | <input type="checkbox"/> High/low ropes certification |
| <input type="checkbox"/> First Aid certification | <input type="checkbox"/> CPR certification | <input type="checkbox"/> Lifeguard certification |
| <input type="checkbox"/> Nature/environmental education | <input type="checkbox"/> Outdoor survival skills | <input type="checkbox"/> Food Service/Cooking |

Office/Administrative _____

Program Development/Leadership _____

Facility Management/Maint., Construction _____

Youth supervision _____



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References:

Name: _____	Phone Number _____
Occupation/Company _____	Best time to call _____
Name: _____	Phone Number _____
Occupation/Company _____	Best time to call _____
Name: _____	Phone Number _____
Occupation/Company _____	Best time to call _____

Note to all applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. _____ YES _____ NO

Calvin Crest Conferences is an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, or any other legally protected status.

Applicant's Statement:

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless that change is specifically acknowledged in writing by an authorized administrator of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of applicant

Print Name

Date