Mt. Bachelor Sports Education Foundation Race Training Center

Alpine Cross Country Snowboard Cycling



EMPLOYMENT APPLICATION

Last Name	First	N		MI	Circle if you ski or board? Alpine - XC - Snowboard		olication				
Street Address					Work desired	Social Secu	irity number				
City		State Zip			Home Phone #	Work Phone #					
E-Mail Address					Cell Phone #	Fax #					
COACHING OPTIONS Circle Discipline: Alpine Cross Country Snowboard	Full-time basis	Part-time basis	Ages: 7-12	Ages: 13-21	Circle Weekend Days Available: Saturday only Sunday only Saturday and Sunday	RACE CREW	OTHER				
Have you ever worked for MBSEF or Mt. Bachelor Ski Area in the past? Yes / No. If Yes, please list below. If Yes, I authorize Mt. Bachelor to release information of my work history.											
Department				Last date employed							
Supervisor				Reason for leaving							
Last or Present Emp	ployer										
Last or present company	Type of busi	Type of business		Type or classification of job							
Street address		Phone numb	er	Brief description	of job duties						
City	City State		ZIP code								
Supervisor's name		Phone numb	er								
Base salary	Dates worked From	То									
Reason for leaving											
Last or Present Ski	Related Empl	loyer									
Last or present company	-	Type of busi	iness	Type or classific	cation of job						
Street address		Phone numb	er	Brief description	of job duties						
City	State	ZIP code									
Supervisor's name		Phone numb	er								
Base salary	Dates worked From	То									
Reason for leaving											

Skiing Background		Location (Mountain)		Level	Dates From To		Head Coach	
Skiing		'	(Wountain)		Tioni	10		
Racing								
Coaching								
Race Crew								
USSCA Certification								
PSIA Certification								
Professional/Work R	eferences							
List two past supervisors and applying.	d one person,	who are not relat	ed to you, who have know	vledge of your o	qualifications	for the po	osition for which you are	
		elationship	Address		Phone number		Occupation	
			(street, city, state, zip code)		(include area code)			
						,		
May we contact your present	t employer?	Please circle	Yes No					
Wage or salary required			110					
_							_	
General Background	!							
Have you ever been convi	icted of a cri	ime? (Excluding	traffic infractions)	Yes N	No.			
•								
If yes, for each convicting State:; Date of convicting State:;			e of the conviction:					
I hereby certify that the misrepresentation or omi understand that my emplo pertinent information bea myself. I understand that	ssion of fac syment may aring upon n	ts on my part be contingent ny employment	will be justification for upon receipt of an alie , and that my continue	or separation f on registration ed employmen	From the co number, ve at depends u	mpany's rificatior ipon the	service, if employed. In of birth, and any other will of the company or	
_		~.						
Date	Signature							

^{*}If any of your educational or employment records are under any other name than the above name, please provide other names.

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