

COOPERSTOWN FUN PARK

Application for Employment

Mailing Address: Cooperstown Fun Park 4850 St. Rt. 28 Cooperstown N.Y. 13326 Phone: 607-547-2767

We consider applicants for all positions without regard to race, color religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Please print and complete this page and send it to the address above

GENERAL INFORMATION

Please type or print in inks all information

Name: _____ Phone No.:(____)_____

Last first m.i.

Present Address: _____

Number street city state zip

Mailing Address: _____

(if different from above) *Number street city state zip*

Social Security No. _____

Are you at least 18 years of age? _____ YES if not, state age _____

Do you have any physical or mental impairment, which would affect your ability to perform the job for which you are applying? YES _____ NO _____

If yes, please explain impairment and accommodations required for you to perform the job for which your are applying.

Have you ever been convicted of a crime? YES _____ NO _____

(You need not answer this question if the crime is one in which the record has been judicially ordered sealed, expunged, or statutorily eradicated or if probation has been successfully completed and the case has been judicially dismissed. Conviction of a crime is not an automatic bar to employment. All circumstances will be considered.)

If yes, please specify all dates and charges: _____

REFERRAL SOURCE

How were you referred to Cooperstown Fun Park?

___ Walk-in ___ Employment Department ___ Internet

___ Employee---Name _____

___ Returning Employee---Years served at Cooperstown Fun Park _____

___ High School---Name _____

___ Advertisement---Name of Source _____

___ Other _____

EDUCATION

Are you currently a student? YES _____ NO _____

	Name	City	State	Highest Grade	Graduated	Degree	Major
High School							
College							
Vocational/Trade							

Are you attending Summer School? YES _____ NO _____

AVAILABILITY INFORMATION

Our peak season is from April through September. Though most positions are seasonal, full and part time is available. Please use careful consideration when completing this section all key management and supervisors position have set schedules in their job descriptions. Due to the nature of our business, we cannot guarantee particular shifts, number of hours/days or number of days off. If unavailability for work on particular days is to religious beliefs, and accommodation may be made.

Time Period---Please *circle* one response for each time period listed.

Prior to Memorial Day (*Last Monday in May*)

I am available: Full-time Part-time Weekends Only I cannot work

During the Summer Months

I am available: Full-time Part-time Weekends Only I cannot work

After Labor Day (*First Monday in September*)

I am available: Full-time Part-time Weekends Only I cannot work

Are you willing and able to work evenings? YES _____ NO _____

Do you have ample transportation to and from work? YES _____ NO _____

POSITION SELECTION

Please select the types of positions for which you wish to be considered. Use the "Other" space if you are applying for a specific job opening. Your application will be reviewed and directed to the department for which you most qualify on the application information.

Cashier Office/Clerical Park Management Shift Supervisor
 Pit Attendant Boat Attendant Miniature Golf Retail Photo Studio
 Food Service Maintenance Grounds / Driving Range Other

MILITARY EXPERIENCE

Are you a U.S. Military Veteran? YES _____ NO _____

U.S. Military Branch of Service: _____ Rank at Discharge: _____

Description of Duties: _____

WORK EXPERIENCE

Have you ever been employed by Cooperstown Fun Park? YES _____ NO _____

If yes, give dates of employment: _____ Department: _____

Name employed under if different than name on this application: _____

Reason for leaving: _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Including any job-related military service assignments and volunteer activities. You may exclude organization which indicate race, color, religion, gender, national origin, handicap or other protected status.

1.

Employer _____ Address _____

Telephone Number(s) _____ Job Title _____

Supervisor _____ Dates Employed _____ to _____

Description of Work _____

Reason for Leaving _____

2.

Employer _____ Address _____

Telephone Number(s) _____ Job Title _____

Supervisor _____ Dates Employed _____ to _____

Description of Work _____

Reason for Leaving _____

3.

Employer _____ Address _____

Telephone Number(s) _____ Job Title _____

Supervisor _____ Dates Employed _____ to _____

Description of Work _____

Reason for Leaving _____

May we contact your present employer?

REFERENCES

Below, give the names of three persons you are not related to, whom you have known at least one year.

	NAME	ADDRESS	BUSINESS	YEARS
1				
2				
3				

COMPUTER EXPERIENCE

Please select the software programs for which you have good experience with.

Microsoft Windows 98 Microsoft Word Microsoft Excel Microsoft Access
 Microsoft Outlook Front Page 2000 Internet Explorer Web Publisher
 Netscape Communicator Print Artist Paint Shop Pro Publisher
 Adobe Premier 5.1 MGI Photo Suite Photo Impact 5 Photo Shop 5.5
 Quickbooks Pro Other: _____

SPECIALIZED EXPERIENCE

C.P.R. ADV. Lifeguard ADV. First Aid
 Small Engine Repair E.M.T. Heavy Equipment
Other: _____ Other: _____

AGREEMENT STATEMENT

1. I hereby certify that all facts on this employment application are true and complete to the best of my knowledge. I understand that any false statements made on this application shall be considered sufficient cause for rejection of this application and/or dismissal from employment.
2. I authorize all schools, persons, previous employers and other organizations named in this employment application to provide Cooperstown Fun Park (Its authorized employees, agents or representatives) with any relevant information that may be required to arrive at an employment decision, and hereby release any such schools, parsons, employment, and organizations, from any liability which they might otherwise incur to we as a result.
3. In the event that I am employed by Cooperstown Fun Park I agree to abide by all present and future policies and regulations.
4. I understand that if I am employed by Cooperstown Fun Park that my employment with Cooperstown Fun Park will be an indefinite period and may be terminated by myself or the employer at any time with or without notice and with or without cause, except as limited by any applicable collective bargaining agreement or other written contract.
5. Upon acceptance of employment, I agree to provide documents that establish my identity and employment eligibility.

Signature _____ Date _____

FOR PERSONAL DEPARTMENT USE ONLY

Arrange Interview Yes _____ NO _____ Scheduled Date: _____ Time: _____

Remarks _____

Employed Yes _____ No _____ Date of Employment _____
Job Title _____ Rate/Salary _____ Department _____
INTERVIEWER DATE

By _____
NAME AND TITLE DATE