## Buffalo Ski Club LLC

## **Employment Application "An Equal Opportunity Employer"**

Applicant	Information									
Full Name:						Date:				
Address:	Last	First			М.І.					
	Street Address			Apartment/Unit #						
	City				State		ZIP Code			
Phone: (	)		-	Cell Phone:						
Date Available: Social Security No.:				Birth Date:						
Position Applied for:										
Do you have a driver's license?				Do you have tra	nsportation to	and from v	vork?	YES		
Have you ever worked for this company?				If so, when?						
				If, so details						
Email Address										
Previous Work										
Company:_		Phone:		Start	and End Date	es:				
Job Title:	lob Title: Rate of Pay:			Reason for leaving:						
Company:_		Phone:		Start	and End Date	es:				
Job Title:		Rate of Pay:		Reason	for leaving:					
Reference	es Pleas	e list two people	you	know well and	are not relat	ed.				
Full Name:				Occupation _						
Years Know	wn				Phone:	()				
Address:										
Full Name:				Occupation						
Years Know					Phone:	( )				
Disclaime	er and Signature									

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: