

Summerville Inc.

W9935 McGowan Road

Lodi, WI 53555

(608) 635-4806

Email: don@smokeyhollowcampground.com

Employment Application Smokey Hollow Campground

Personal Information

Name _____ Date of Application ____/____/____
Last First M.I.

Address _____
Street City State Zip

Phone(____) Cell Phone(____)

Email _____ Social Sec. Number ____-____-____

Date of Birth ____/____/____

Do you have transportation? Yes No

Emergency Contact

Name _____ Relationship _____

Address _____

Phone(____) Cell Phone(____)

How did you learn about our company? _____

Are you available to work weekends? Yes No

Are you available to work evenings? Yes No

When are you available to start? ____/____/____

If this is a seasonal position, when is your expected ending date? ____/____/____

Education

	Name and Location	Subjects Studied	Graduate?	Current Grade?
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No Year _____	
College or University			<input type="checkbox"/> Yes <input type="checkbox"/> No Year _____	
Specialized Training, Trade School, etc . . .				
Other Education				

Please list your areas of highest proficiency, special skills or other items that may contribute to your performance.

Training/Certifications (Lifeguard, CPR, First Aid, etc.)

Certification: _____ Expires: _____

Certification: _____ Expires: _____

References – Please list two references who are not family.

Name _____	Relationship _____
Occupation _____	Phone (_____) _____ Years Known: _____
Name _____	Relationship _____
Occupation _____	Phone (_____) _____ Years Known: _____

Health Questions

Have you had or do you have any physical limitations that may affect your ability to function on your job: Yes No (If yes, please describe) _____

How would you describe your general health? _____

Have you had any previous serious illnesses? (describe briefly) _____

Have you ever been seriously injured? Yes No How? _____

Miscellaneous:

Please answer the following questions to the best of your knowledge in the space provided.

Why have you chosen our company for employment?

Please give us any additional information that you feel makes you well suited for employment with us. (Hobbies, interests, extra-curricular activities, honors, awards, etc.)

Previous Employment – List your last three employers with the most recent first.

Company Name _____	Position _____
Address _____ _____	Dates of Employment ____ / ____ to ____ / ____
Phone (_____) _____	Salary _____
Supervisor _____	Reason for Leaving _____
Duties _____ _____	
Company Name _____	Position _____
Address _____ _____	Dates of Employment ____ / ____ to ____ / ____
Phone (_____) _____	Salary _____
Supervisor _____	Reason for Leaving _____
Duties _____ _____	
Company Name _____	Position _____
Address _____ _____	Dates of Employment ____ / ____ to ____ / ____
Phone (_____) _____	Salary _____
Supervisor _____	Reason for Leaving _____
Duties _____ _____	

Other Comments

Authorization

I certify that my answers are true and complete to the best of my knowledge. I authorize Summerville Inc. to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application. By signing this form, I also have indicated that I do not have any pending convictions or any criminal charges filed or have been filed against me.

In the event that I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that I am subject to a pre-employment drug test and criminal background check.

Signature of applicant _____ Date _____

**Please return completed application to:
Smokey Hollow Campground • W9935 McGowan Road • Lodi, WI 53555**