



Employment Application
An Equal Opportunity Employer

Please Print Clearly

Date _____

Last Name First Name Middle

Present Address _____

No. & Street City State Zip

Mailing Address(if different from present address) _____

No. & Street City State Zip

Cell Phone Home Phone

Email Address: _____

Employment Desired

Position applying for _____

Personal Information

Have you ever applied to or worked for Idyllwild Pines Camp before? Yes No
If yes, when? _____

Do you have any friends or relatives working for Idyllwild Pines Camp ? Yes No
If yes, state name(s) and relationship:

P.O. Box 425, Idyllwild, CA 92549
(951) 659-2605
Rochelle@idyllwildpines.org

Name Relationship

Name Relationship

Employment Application

Education, Training, and Experience

School Name and Address No. of Years. Have you graduated?

Yes No

High School

No. of Years

City, State

Yes No

College/ University

No. of Years

City, State

Yes No

Vocational/ Business

No. of Years

Yes No

Certifications

Employment Application

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer Telephone No.

Type of Business Your Supervisor's Name

Address & Street City State Zip

Dates of Employment:

Weekly Pay:

From To Starting Ending

Your Position and Duties

Reason for Leaving

May we contact this employer for a reference? Yes No

Name of Employer Telephone No.

Type of Business Your Supervisor's Name

Address & Street City State Zip

Dates of Employment: _____

Weekly Pay: _____

From To Starting Ending

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Your Position and Duties

Reason for Leaving

May we contact this employer for a reference? Yes No

Note: Attach additional page(s) if necessary.

References

List below a person not related to you who has knowledge of your work performance within the last three years:

First Name, Last Name, Telephone No.

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my
Initials

chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize **Idyllwild Pines Camp** to thoroughly investigate my references,
Initials work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may
Initials be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

_____ Should a search of public records (including records documenting an arrest, indictment, conviction,
Initials civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

_____ I waive receipt of a copy of any public record described in the paragraph above.
Initials

92549 P.O. Box 425, Idyllwild, CA
ph.951/659-2605 email:
Rochelle@idyllwildpines.com

Date

Applicant's Signature

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(951) 659-2605
Rochelle@idyllwildpines.org