Squire Boone Caverns, Inc.

Application for Employment

Thank you for taking the time to complete an application for employment. We wish to process all applications as promptly as possible, so please be sure you have fully completed the application.

app	meations as promptify as possible, so prease se sure you have run, compreted the approach
Did an e	employee of Squire Boone Village refer you? □ Yes □ No
Employ	ee's name:
inside a	Imost all employees within this company are asked at one time or another to assist with duties nd outside the department for which they were hired. If you are hired for one of our open as, you will be expected to work in other areas and/or positions (your pay would not change).
	Applications: Please complete the statements below
1.	Check the categories listing the type of position(s) in which you are interested. Please check all that apply. Note: You will only be considered for the types of positions you check. Tour Guide Candle/Soap Maker Gristmiller Baker Shopkeeper Maintenance Other:
	(Please write in the position(s) in which you are interested)
2.	Check the categories listing the number of hours you are able or willing to work. Please check all that apply. 40 hours per week Between 30 and 40 hours per week Less than 30 hours per week (Please list the number of hours you are available to work)
3.	If you are interested in seasonal employment, please check the categories listing the number of hours you are able or willing to work. Please check all that apply. 40 hours per week, seasonal (Summer months) Between 30 and 40 hours per week, seasonal (Summer months) Less than 30 hours per week, seasonal (Summer months) (Please list the number of hours you are available to work)

Dloaco	chack all th	at apply: What days can you work (summer holidays are required):				
Piease	check all th	at apply: What days can you work (summer holidays are required).				
		Weekdays only				
		Saturday				
		Sunday				
		Any day				
		Other				
4.	Check the	categories listing the rate of pay you are expecting. Please check all that apply.				
		will only be considered for positions with the rate of pay you check.				
		\$ 7.25 to \$8.00 an hour				
		More than \$ 8.00 an hour				
5.	Please che	ck the categories listing the amount of weight you are able or willing to lift.				
		Between 25 and 35 pounds				
		Between 35 and 45 pounds				
		Between 50 and 55 pounds				
6	Chack the	categories listing the type of environment in which you are able or willing to work				
0.	Check the categories listing the type of environment in which you are able or willing to work. Please check all that apply.					
		Inside				
		Outside				
		Dusty				
		Dirty				
7	Check the	categories listing the type of working conditions in which you are able or willing to				
,.		se check all that apply.				
		Standing all day				
		Sitting all day				
		Climbing stairs several times per day				
		Repetitive work				
		Working alone				
	П	Working in different job positions				

We appreciate your interest in Squire Boone Caverns, Inc. A clear understanding of your background and work history will aid us in our efforts to place you in a position that best matches your qualifications. Squire Boone Caverns Inc. is an equal opportunity employer. Please complete all information requested.

If you need any accommodation in completing the application process, please inform us.

(Please print legibly) Name: _____ Date: ___/___ SSN: ___/__/ (Last) (First) (Middle) Current address: _____ How Long: (Street) (City) (State) (Zip) Home Phone: (____) _____ Age if under 18:____ **Referral Source:** □ Government employment agency □ Private employment agency □ Advertisement □ Walk-in □ Friend □ School □ Relative □ Other: □ Employee Do you have any relatives that are now or have been in the past employed by Squire Boone Caverns Inc.? □ Yes □ No If yes, who? Relationship: Positions Applying For: (Check any of which you have experience or educational training) □ Production □ Clerical/secretarial ☐ Grounds keeping □ Warehouse □ Shop clerk □ Computer programming ☐ Management □ Shipping/receiving □ Accounting □ Customer service □ Other:____ □ Data entry Rate of Pay Expected: ____/hr (Please indicate range or minimum acceptable) Have you applied previously? □ Yes □ No If yes, when? _____ Were you previously employed by Squire Boone Caverns, Inc.? ☐ Yes ☐ No If yes, when? **Are you available work:** (Check all that apply) □ Part time □ Full time □ Irregular shifts □ Temporary □ Seasonal ☐ Over 40 hours □ 1st shift □ 2nd shift □ 3rd shift □ Weekends Squire Boone Caverns & Village is open seven days a week during the tourist season. Not including the need for absences for religious practices during scheduled work hours, are you otherwise able to work Saturdays? □ Yes □ No Sundays? □ Yes □ No Are you employed now? □ Yes □ No Are you on a lay-off and subject to recall? □ Yes □ No If hired, what date are you able to start work? _____/____ May we contact your present employer? □ Yes □ No Are there any other names under which records may be found? □ Yes □ No If yes, what? ____

	Name & Lo	ocation of School	Course of S	Study Years	Completed		
EDUCATION	College						
	High School						
	Trade School						
	Other(Explain)						
	Describe specialized training, apprenticeship, skills, and extra-curricular activities:						
	Honors Received:	Honors Received:					
MILITARY	Complete this section if you served in the US Armed Forces Describe your duties and any special training:						
	Branch of Service: MOS (Job Specialty): Period of Active Duty From: To: What jobs did you perform?						
	Military Training Received:						
REFERENCES	Name	Address	Profession	Years Known	Phone		

	Company Name				Phone:
	Address	City	State	ZIP	Employed (Month/Year) From:/ To:/
	Name of Supervisor		Their Job Title	2:	Hourly Pay: Start: End:
	Describe Your Work:		Your Job Title	2:	Reason for Leaving:
	Company Name				Phone:
EMPLOYMENT HISTORY	Address	City	State	ZIP	Employed (Month/Year) From:/ To:/
	Name of Supervisor		Their Job Title	e:	Hourly Pay: Start: End:
	Describe Your Work:		Your Job Title	2:	Reason for Leaving:
	Company Name				Phone:
	Address	City	State	ZIP	Employed (Month/Year) From:/ To:/
	Name of Supervisor		Their Job Title	e:	Hourly Pay: Start: End:
	Describe Your Work:		Your Job Title	2:	Reason for Leaving:
EXPLANATIONS	Have you ever been disciplined If yes, explain:				
	Please account for any gaps between the employment dates listed above:				

COMMENTS	Is there anything else you wish to tell us about yourself? (Hobbies, special interests, etc.)					
	Why do you wish to work for Squire Boone Caverns?					
WORK	Are you prevented from lawfully becoming employed in this county because of Visa or Immigration Status?					
RIGHT TO WORK	Note: As of June 1, 1987, The Immigration Reform and Control Act makes every employer in the US part of the immigration enforcement system. If hired, you will need to present a document or documents within 72 hours to verify identification and your right to work. Generally, this consists of a driver's license with picture, social security card, or state certified birth certificate.					
ОТНЕК	Have you been convicted of a felony within the last seven (7) years? Yes No If yes, explain:					
	A felony conviction record does not mean that you are automatically disqualified from employment with the Company. Factors such as your age at the time of the conviction, how along ago the conviction occurred, and the seriousness and nature of the violation are important and will be taken into consideration. Therefore, please give all the facts so that a proper decision can be made.					
	Do you know of any reason why you would not be able to perform the job for which you are applying, with or without an accommodation? \Box Yes \Box No					
	Applicant's Statement (Please read carefully) I certify that the answers herein are true and complete to the best of my knowledge.					
	I understand that this application is not, and is not intended to be, a contract of employment.					
STATEMENT	I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I further release from all liability former employers, educational institutions, personal references, or others having knowledge of my character, ability and work record responding to such inquiries by Squire Boone Caverns, Inc.					
	I understand that should an offer for a position be made before all references are received and verified that continuing employment depends on obtaining satisfactory references from the sources listen herein.					
	Further, I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time for any reason and without any previous notice.					
	In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the Company.					
	Signature of Applicant Date					

Applicant Data Record

Applicants are considered for all positions and during employment are treated without regard to race, color, religion, sex, national origin, age, veteran status, disability, and any other legally protected status. As employers, we comply with government regulations, including affirmative action responsibilities where they apply.

Solely to help us comply with this government record keeping, reporting, and other legal requirements, we request that you complete this applicant data record. Thank you for your cooperation.

This data is for periodic government reporting and will be kept in a Confidential File separate from the

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(Please print)								
Date://								
Name:					Ph	one: ()		
(Last)		(First) (Mid		(Middle))			
Current address:								
	(Str	eet)		(City)	(City)		(Zip)	
Position(s) applied fo	r:							
Referral Source:								
□ Employmen	t agency	□ Adv	□ Advertisement		□ Walk-in	□ Employ	ee	
□ Friend	□ School	□ Relative			□ Other: _			
		Volu	ntary	y Surve	e y			
Check applicable:	□ Male	□ Fem	nale					
Check one of the follo	wing:							
Race/Ethnic Group:	□ White	□ Black		□ Hispar	nic			
	□ Native American/Alaskan Native							
	☐ Asian/Pacific Islander							
Check if any of the fol	llowing are ap	plicable:						
	□ Vietnam Veteran □ Disabled Veteran □ Disabled Individual							