## **HELM OF SUN VALLEY**

**Employment Application** 

San Jose: (408) 996-SNOW Capitola: (831) 462-6800



APPLIC	ANT II	NFORN	MATION																		
Last Name	е						First						M.	.1.		Date	е				
Street Address												Apartment/L			Jnit #	ŧ					
City							State							Р							
Phone							E-mail	Address													
Date Available Desired W					Wa	ge															
Position Applied for																Win	iter		Su	mme	r 🗌
Are you a citizen of the United States?					N	o 🗆	If no, are you authorised to w						in tl	he US	?	YES		ı	NO [		
Have you	ever wo	orked fo	r this comp	any?	YES 🗆	N	ο□	If so,	If so, when?												
Have you	ever be	en conv	victed of a f	elony?	YES	N	o 🗆	If yes,	If yes, explain												
Referred I	by:				1																
EDUCAT	LION																				
High Scho	ool					Ad	ddress														
From		To Did you graduate?		YI	ES 🗆	NO [	NO Degree														
College						Ad	ddress														
From	To Did you graduate?		YI	ES 🗆	NO [	NO Degree															
Other	Other					Ad	ddress														
From		To Did you graduate?		YI	ES 🗆	NO [	NO Degree														
REFERE	NCES																				
Please list	t three p	orofessio	onal referer	nces.																	
Full Name								Re	lation	ship											
Company									Ph	one	(	)									
Address																					
Full Name	)									lation	ship										
Company								Ph	one	(	)										
Address									'												
Full Name	Full Name								Relationship												
Company									Ph	one	(	)									
Address																					

PREVIOUS EMPLOYMENT										
Company							)			
				Phone (		,				
Address				Supervisor						
Job Title			Starting	g Wage	\$		Ending Wag	e \$		
Responsibilities										
From	То	Reason for Leaving								
May we contact yo	ur previous superv	visor for a reference?	YE	s $\square$	NO □					
Company					Phone	(	)			
Address					Supervisor					
Job Title			Starting Wage		\$		Ending Wag	e \$		
Responsibilities										
From	То	Reason for Leaving								
May we contact yo	ur previous superv	visor for a reference?	YE	s 🗆	NO □					
Company					Phone	(	)			
Address			Supervisor							
Job Title			Starting	g Wage	\$		Ending Wag	e \$		
Responsibilities										
From	То	Reason for Leaving								
May we contact your previous supervisor for a reference?										
DRIVING HIST	ORY									
Have you had any	tickets in the past	3 years?		١	'ES 🗌	NO				
If yes, what is the	date and infraction	of the most recent	ticket?							
Please comment on your driving record:										

MATH SKILLS
What is the sales tax in Santa Clara county or Santa Cruz county?
Calculate tax on a \$400 sale:
Total amount:
Calculate a 30% discount on a \$350 sale, and include sales tax:
Total amount:
PERSONAL INFORMATION
Describe in detail why you want to work for Helm of Sun Valley:
Do you ski or snowboard?
If so, describe your level of ability and how often you ski/board:
Do you own your own equipment?

If you worked at Helm would you expect to ski/board more or less?							
Who makes the best ski/board equipment?							
Why?							
What equipment do you own?							
Where did you purchase it?							
What is your favorite ski/board shop?							

DISCLAIMER 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				Date							
CDL:				EXP:							
AVAILABILITY											
Full time ☐ Part time ☐ Number of hour				s per week:							
Detail your weekly availability for work:  (consider all of your obligations and travel time)											
Sunday											
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Saturday											
Please detail your Seasonal Plans:											
Late October		Thanksgiving	Christmas/Hanukkah		New Year						