



**APPLICATION FOR EMPLOYMENT**  
 Garden of the Gods Visitor & Nature Center  
 1805 North 30th Street  
 Colorado Springs, Colorado 80904-1247  
 719.634.6666      FAX: 719.634.0094

**PERSONAL DATA**

<b>Name:</b>		
<b>Last</b>	<b>First</b>	<b>Middle</b>
<b>Street Address:</b>		
<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Telephone Number:</b>		<b>Position Applied For:</b>

**EMPLOYMENT HISTORY**

EMPLOYER	Date	Position	Reason for Leaving
<b>Name:</b>	<b>From:</b>		
<b>Address:</b>			
<b>City, State:</b>	<b>To:</b>	<b>Salary/Month</b>	
<b>Phone:</b>	<b>Supervisor:</b>	\$	

EMPLOYER	Date	Position	Reason for Leaving
<b>Name:</b>	<b>From:</b>		
<b>Address:</b>			
<b>City, State:</b>	<b>To:</b>	<b>Salary/Month</b>	
<b>Phone:</b>	<b>Supervisor:</b>	\$	

EMPLOYER	Date	Position	Reason for Leaving
<b>Name:</b>	<b>From:</b>		
<b>Address:</b>			
<b>City, State:</b>	<b>To:</b>	<b>Salary/Month</b>	
<b>Phone:</b>	<b>Supervisor:</b>	\$	

**EDUCATION**

Name of School	Address:	Dates Attended	Diploma/Degree Certificate or Credits
<b>High School:</b>			
<b>College:</b>			
<b>Other:</b>			
<b>Special Skills:</b>			
(Typing, computer skills, etc.)			

<b>MILITARY SERVICE</b>	<b>Yes</b>	<b>No</b>	<b>Dates:</b>
<b>Branch:</b>	<b>Duties:</b>		

Are you authorized to work in the United States? ( ) Yes ( ) No	Proof of authorization required
---	---------------------------------

<b>GENERAL INFORMATION</b>			
How were you referred to this company?			
Have you ever been convicted of an offense other than a minor traffic violation?	Yes	No	
If yes, please explain:			
Have you ever been previously employed by this company	Yes	No	
If yes, please give dates.	From	To:	
Attendance on last job or school:	Poor	Fair	Average Good
List number of days missed per year			

<b>REFERENCES:</b>		
Name:	Occupation	Years Known
Address:		
City, State, Zip		
Phone:		

<b>REFERENCES:</b>		
Name:	Occupation	Years Known
Address:		
City, State, Zip		
Phone:		

<b>REFERENCES:</b>		
Name:	Occupation	Years Known
Address:		
City, State, Zip		
Phone:		

Please use the following space for any additional information or remarks which you wish us to consider when making our employment decision.

Review your answers carefully and read the statements below before signing.

**AGREEMENT**  
**THIS APPLICATION IS NOT INTENDED TO BE A CONTRACT OF ANY KIND. WE ARE AN AT WILL EMPLOYER. THE COMPANY RETAINS ITS RIGHT TO TERMINATE EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE.**

**I CERTIFY THAT THE ANSWERS GIVEN HERE ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATION OF APPLICATION STATEMENTS AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION IN THE EVEN OF EMPLOYMENT.**

**I UNDERSTAND I AM REQUIRED TO ABIDE BY THE RULES OF THE COMPANY.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**GARDEN OF THE GODS VISITOR & NATURE CENTER  
2016  
EMPLOYEE AVAILABILITY FORM**

**NAME:** \_\_\_\_\_

**Please indicate the hours YOU are available to work in SUMMER**  
We are open 8:00am to 7:00pm May 28, 2016 through September 5, 2016

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

**Please indicate the hours YOU are available to work in FALL, WINTER & SPRING**  
We are open 9:00am to 5:00pm September 6, 2016 through May 26, 2017

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

**Please indicate the DATES YOU REQUEST OFF:      INCLUDE DATE & EVENT**  
(example: vacation, camping, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you are leaving at the end of Summer **WHAT WILL BE YOUR LAST DAY OF WORK?**

\_\_\_\_\_

**PLEASE NOTE:** THIS WORKSHEET WILL HELP US DETERMINE YOUR WORK SCHEDULE.

**WE CANNOT PROMISE TO MEET THE REQUEST LISTED, BUT WILL DO OUR BEST TO MEET THE MOST IMPORTANT ONES.**