## **Employment Application**

**OFFICE** 

Indian Lake Hills is an equal opportunity and at will employer

Email Address _ Job applied for _ BACKGROUN				How di	d you le	arn abo	out th	nis openin	g?				
1. Are you 18 ye 2. Do you have I 3. Are you a U.S	ars of a eliable	transporta	ation to v	work? Y					MM/DI	D)			
4. Have you eve	r been d	convicted of	of a felor	ny? Yes		No							
MONDAY	TUESDAY		WEDNESDAY		THURSDAY		FRIDAY			SATU		SUNDAY	
FROM TO	FROM	то	FROM	то	FROM	то	FI	ROM TO	) F	ROM	то	FROM	тс
Name, Address and		•	From	To	Position		NT)	Starting Wage	Finish Wage	_	Reason	for Leav	ring
								vvuge	vvage				
EDUCATION			1		1								
High School		Name of School		Years Attended		Last	Last Year Completed		Dic	l you Gr	aduate?	Dip	
College/VoTech	1												
Other													
PERSONAL RI	EFEREI	NCES (NO	OT FOR	MER E	EMPLO	YERS	OR I	RELATIV	ES)				<u> </u>
Name				Relationship (e.g., Coach, Teacher, Family Frier			riend)	Contact Information					
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dismissal, regardless of when such omission or misrepresentation might be discovered by the Company. In submitting this application, I understand and authorize Indian Lake Hills to check the records with agencies and ascertain the accuracy of what I state herein. I also consent to allowing those agencies mentioned herein, when contacted by Indian Lake Hills or its agent with regard to the requested information for employment to release such information. If hired, I agree to conform to the rules and regulations of Indian Lake Hills, and understand that my employment and compensation is "at will" and can be terminated with or without notice at any time at the option of the Company or myself. I further understand that Indian Lake Hills or any agent of the Company shall have the maximum discretion permitted by law to administer, interpret, modify, or discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. Indian Lake Hills is a seasonal employer.

I understand that before any offer of employment is finalized or thereafter if hired, I may be required to submit to a blood, urine and/other testing for alcohol, drugs, or controlled substance at a Company selected facility at the Company's expense.

I HAVE READ AND UNDERSTAND THIS APPLICATION AND THE QUESTIONS, STATEMENTS AND CONDITIONS OF EMPLOYMENT CONTAINED HEREIN.

Applicant's Signature	Date