

# Application for Employment Lake Guntersville State Park

FULL NAME: \_\_\_\_\_ SOCIAL \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_ RELATION: \_\_\_\_\_

D.O.B. \_\_\_\_\_ LIC, ID, OR PASSPORT# \_\_\_\_\_ STATE \_\_\_\_\_

EVER APPLIED FOR OR WORKED FOR ALABAMA STATE PARKS? YES \_\_\_ NO \_\_\_  
 IF YES WHAT PARK: \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ NUMBER: \_\_\_\_\_

HIGHEST LEVEL GRADE REACHED: DIPLOMA \_\_\_ GED \_\_\_ COLLEGE \_\_\_\_\_

EVER BEEN CONVICTED OF A FELONY ? YES \_\_\_ NO \_\_\_ CONVICTION: \_\_\_\_\_

POSITION APPLYING FOR: \_\_\_\_\_ DATE AVAILABLE: \_\_\_\_\_

AVAILABLE FOR BUCKS POCKET EMPLOYMENT? YES \_\_\_ NO \_\_\_

ANY RESTRICTIONS WE NEED TO BE AWARE OF: \_\_\_\_\_

LIST THE NAME AND PHONE NUMBER OF TWO PERSONS, NOT RELATIVES OR FORMER EMPLOYERS, AS REFERENCES:

NAME	PHONE NUMBER	YRS KNOWING THEM

CHECK HOURS, SHIFTS, DAYS OF THE WEEK YOU ARE AVAILABLE (Depending on job may still be scheduled)

SHIFT	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
6am-11am							
11am—4pm							
4pm-10pm							
8pm-2am							

**Work History**

<b>Current/Last Employer:</b>				<b>Official job title:</b>						
<b>Address:</b>				<b>Type of Business:</b>						
FROM	MO	YR	TO	MO	YR	Total Months	If part time no. of hours worked	Beginning Pay start - ending \$ ___ / ___	How often paid	May we contact employer
<b>Name of Supervisor:</b>						<b>Reason for leaving:</b>				
<b>Describe duties in detail:</b>										

“The Department of Conservation and Natural Resources does not discriminate on the basis of race, color, religion, age, sex, national origin, disability, pregnancy, genetic information or veteran status in its hiring or employment practices nor in admission to, access to, or operations of its programs, services, or activities.”

Previous Employer				Official job title			
Address:				Type of Business			
FROM MO    YR	TO MO    YR	Total Months	If part time no. of hours worked	Beginning Pay start - ending \$ ____ / ____	How often paid _____	May we con- tact employer	
Name of Supervisor:				Reason for leaving:			
Describe duties in detail:							

Previous Employer				Official job title			
Address:				Type of Business			
FROM MO    YR	TO MO    YR	Total Months	If part time no. of hours worked	Beginning Pay start - ending \$ ____ / ____	How often paid _____	May we con- tact employer	
Name of Supervisor:				Reason for leaving:			
Describe duties in detail:							

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FROM MO    YR	TO MO    YR	Total Months	If part time no. of hours worked	Beginning Pay start - ending \$ ____ / ____	How often paid _____	May we con- tact employer	
Name of Supervisor:				Reason for leaving:			
Describe duties in detail:							

What does customer service mean to you? \_\_\_\_\_

Any other talents or hobbies you want to share? \_\_\_\_\_

**I UNDERSTAND THAT EMPLOYMENT AT LAKE GUNTERVILLE STATE PARK MAY REQUIRE WEEKEND, HOLIDAY, AND IRREGULAR HOURS. I certify that all statements on the front and back of this application or on attached pages, are true and correct to the best of my knowledge. I understand that any false statements may cause me to be refused the opportunity for employment. I further authorize the release of relevant prior employment, military, and criminal records.**

Signature (in ink): \_\_\_\_\_ Date: \_\_\_\_\_