

Lost Trail Snowsports School Employment Application

Name: _____
Date of Application ___/___/___ Phone# _____ E-mail _____
Address _____ City _____ ST ___ Zip _____
Position you are applying for: _____

EXPERIENCE AND EMPLOYMENT(Please List your most recent Job and work back).
Employer Name _____ Supervisor Name _____
Address _____ Telephone Number:(____)____ - _____
Reason for Leaving _____ Job Title _____
Pay Rate: _____ Hours per Week: _____
Dates of Employment: From: _____ To: _____
Duties and Accomplishments: _____

Employer Name _____ Supervisor Name _____
Address _____ Telephone Number:(____)____ - _____
Reason for Leaving _____ Job Title _____
Pay Rate: _____ Hours per Week: _____
Dates of Employment: From: _____ To: _____
Duties and Accomplishments: _____

Employer Name _____ Supervisor Name _____
Address _____ Telephone Number:(____)____ - _____
Reason for Leaving _____ Job Title _____
Pay Rate: _____ Hours per Week: _____
Dates of Employment: From: _____ To: _____
Duties and Accomplishments: _____

Education:	<u>School Name</u>	<u>City/State</u>	<u>Major</u>
<u>Year</u>			
(High School)			(N/A)

Do you have any First Aid training ___ No ___ Yes, If Yes Please List course and expiration. _____
Have you ever been arrested? ___ No ___ Yes. If Yes, Please Explain _____

List three personal references, not related to you, and their phone numbers.

1. _____ Phone# _____
2. _____ Phone# _____
3. _____ Phone# _____

List Ski/Snowboard Educational Background. (Certifications, Clinics, Books, Camps, Programs, Lessons, etc...) _____

List ANY Previous Ski/Snowboard Teaching Experience. _____

List "Other" Teaching, Coaching, or Program Coordinating Experience. _____

Describe what motivates you to Teach or Coach at Lost Trail. _____

If selected I will be available as follows:

Holiday Run 12/23/2010 - 1/2/2011 (Indicate days available) _____

Christmas Day? Yes ___ No ___

After 1/2/2011 Days Available: Thurs: ___ Fri: ___ Sat: ___ Sun: ___

Holidays _____

Days NOT Available _____

Mail To: Chris Miller LTSS
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