### **Sedona Adventure Tours Employment Application Form**

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

#### APPLICATION FOR EMPLOYMENT

Last First Middle Maiden  Present address    Number   Street   City   State   Zip	Name					
Number   Street   City   State   Zip			First	Middle		Maiden
Social Security No	Present address					
Telephone ()  If under 18, please list age  Position applied for (1) Days/hours available to work  No Pref Thur  Mon Fri  (Be specific) Tue Sat  Wed Sun  How many hours can you work weekly? Can you work nights?  Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME  When available for work?  TYPE OF SCHOOL NAME OF SCHOOL   LOCATION (Complete mailing address)   LOCATION (Complet		Number	Street	City State	Zip	
Days/hours available to work Position applied for (1)	How long		So	cial Security No.		
Days/hours available to work No Pref Thur and salary desired (2) Mon Fri (Be specific) Sat How many hours can you work weekly? Can you work nights? Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME When available for work?  TYPE OF SCHOOL NAME OF SCHOOL LOCATION (Complete mailing address) NUMBER OF YEARS DECOMPLETED DE	Telephone ( <u>)</u>					
Position applied for (1) No Pref Thur and salary desired (2) Mon Fri Tue Sat Wed Sun How many hours can you work weekly? Can you work nights? Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME When available for work?   TYPE OF SCHOOL NAME OF SCHOOL LOCATION (Complete mailing address)	f under 18, please list	age				
Position applied for (1) No Pref Thur and salary desired (2) Mon Fri Tue Sat Wed Sun How many hours can you work weekly? Can you work nights? Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME When available for work?   TYPE OF SCHOOL NAME OF SCHOOL LOCATION (Complete mailing address) COMPLETED DEGREE DEGREE DEGREE COMPLETED DEGREE				Days/hours av	ailable to work	
Tue Sat				No Pref	Thur	
Wed Sun  How many hours can you work weekly? Can you work nights?  Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME  When available for work?  TYPE OF SCHOOL NAME OF SCHOOL   LOCATION		2)		Mon	Fri	
How many hours can you work weekly? Can you work nights?  Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME  When available for work?  TYPE OF SCHOOL NAME OF SCHOOL (Complete mailing address)  High School  College  Bus. or Trade School	(Be specific)					
Employment desiredFULL-TIME ONLYPART-TIME ONLYFULL- OR PART-TIME  When available for work?  TYPE OF SCHOOL NAME OF SCHOOL LOCATION (Complete mailing address)  High School  College  Bus. or Trade School						
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TYPE OF SCHOOL NAME OF SCHOOL LOCATION NUMBER OF YEARS MAC (Complete mailing address)  High School  College  Bus. or Trade School	Employment desired	FULL-TIME ONLY	PART-TIME	ONLYI	FULL- OR PART	Г-ТІМЕ
TYPE OF SCHOOL NAME OF SCHOOL LOCATION NUMBER OF YEARS MAX (Complete mailing address)  High School  College  Bus. or Trade School	When available for wo	rk?				
(Complete mailing address)  High School  College  Bus. or Trade School						
(Complete mailing COMPLETED DEC						
(Complete mailing address)  High School  College  Bus. or Trade School	TYPE OF SCHOOL	I NAME OF SCHOOL	LOCATION	I NIIIMDEE	O O E VEADS	MAJOR &
Address)  High School  College  Bus. or Trade School	TTPE OF SCHOOL	NAME OF SCHOOL				DEGREE
College  Bus. or Trade School						
Bus. or Trade School	High School					
Bus. or Trade School	College					
Professional School	Bus. or Trade School					
	Professional School					
	Professional School					
HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes	Professional School					
——————————————————————————————————————		EN CONVICTED OF A CR	RIME? No	Ye	S	
If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) w committed, sentence(s) imposed, and type(s) of rehabilitation.	HAVE YOU EVER BE		<del></del>			•
committed, sentence(s) imposed, and type(s) or renabilitation.	HAVE YOU EVER BE	of conviction(s), nature of	f offense(s) leading to	conviction(s), how	v recently such	

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DUICATION FOR EMPLOYMENT	

### APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? Yes	No			
What is your means of transportation to work?				
Driver's license number State o Expiration date	f issue		_ Operator  Com	nmercial (CDL) Chauffeur
Have you had any accidents during the past three year				nany?
Have you had any moving violations during the past t	hree years	s?	How N	Many?
	OFFIC	E ONLY		
Yes Typing No WPM  Personal Yes PC Computer No Mac	10-key	Other		Yes No WPM
Please list two references other than relatives or prev	ious empl	oyers.		
Name	<del></del>	Name		
Position	·	Position _		
Company		Company		
Address		Address _		
		_		
Telephone ( )		Telephone	( )	
An application form sometimes makes it difficult for a space below to summarize any additional information which you are applying.				

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DI IOATION FOR EMPLOYMENT	

APPLICATION FOR EMPLOYMENT			
MILI	TARY		
HAVE YOU EVER BEEN IN THE ARMED FORCES?	Yes No		
	Yes	No	
Specialty Date Er			
Date Li	itereu	Discharge Date	<i>,</i>
Work Please list your work experience for the past If you were self-employed, give firm name. A			job held.
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From	Start
		То	Final
	Your last job title		
Reason for leaving (be specific)			
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From	Start
		То	Final
Your Last Job Title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, company.	advancements or pro	omotions while you wo	rked at this

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Work Please list your work experience for the past five years beginning with your most recent job held.  If you were self-employed, give firm name. Attach additional sheets if necessary.				
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip Code Phone number		From	Start	
Thore number		То	Final	
	Your last job title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or learned company.	ed, advancements or pro	omotions while you wo	rked at this	
		1	ı	
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip Code Phone number		From	Start	
There is named.		То	Final	
	Your last job title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or learned company.	ed, advancements or pro	omotions while you wo	rked at this	
May we contact your present employer? Yes No	)			
Did you complete this application yourself Yes No				
If not, who did?				