



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, sexual orientation, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job Applied for _____ Today's Date _____

Are you seeking: Full-time Part-time Temporary employment?

When could you start work? _____

GENERAL

Last Name First Name Middle Name Telephone Number

Present Street Address City State Zip Code

Email Address

Are you 18 years of age or older? Yes No
(The Zoo employs minors for certain positions. If you are hired, you may be required to submit proof of age.)

If hired, can you furnish proof you are eligible to work in the U.S.? Yes No

Were you ever employed here? Yes No If yes, when? _____

Do you have any relatives who are presently employed here? Yes No If yes, please indicate:
Name/s _____ Dates _____

Have you ever been convicted of any law violation? (Include any plea of "guilty" or "no contest." Exclude minor traffic violations.) Yes No
If yes, give details _____
(A conviction will not necessarily disqualify an applicant for employment.)

If employed, do you expect to be engaged in any additional business or employment outside of our job? Yes No

If yes, give details _____

Do you have any objection to working overtime? Yes No

Can you work overtime without prior notice? Yes No

Can you work on Saturday? Yes No

Can you work on Sunday? Yes No

Can you travel if required by this position? Yes No

How were you referred to the Cheyenne Mountain Zoo?

EDUCATION

List Name and Address of Schools		Number of Years Completed	Diploma/Degree/Certificate
High School or GED			
College or University			
Subjects Studied			
Vocational or Technical			
Subjects Studied			

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying? _____

What machines or equipment can you operate that are related to the job for which you are applying? _____

For Jobs that involve driving only: Do you have a valid driver's license? Yes No

Driver's License Number _____ Class of License _____ State Licensed In _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes No

If yes, give details: _____

List professional, trade, business or civic activities and offices held.
(Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability, or other protected status.)

WORK HISTORY

List names of employers for the last 5 years in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Note: A job offer may be contingent upon acceptable references from current and former employers.

Name, Address and Telephone of Employer	Employed		Wage/Salary		Reason for leaving
	From (mo/yr)	To (mo/yr)	Start	Final	
			\$	\$	
Title	Duties				Supervisor(s)

Name, Address and Telephone of Employer	Employed		Wage/Salary		Reason for leaving
	From (mo/yr)	To (mo/yr)	Start	Final	
			\$	\$	
Title	Duties				Supervisor(s)

Name, Address and Telephone of Employer	Employed		Wage/Salary		Reason for leaving
	From (mo/yr)	To (mo/yr)	Start	Final	
			\$	\$	
Title	Duties				Supervisor(s)

Name, Address and Telephone of Employer	Employed		Wage/Salary		Reason for leaving
	From (mo/yr)	To (mo/yr)	Start	Final	
			\$	\$	
Title	Duties				Supervisor(s)

REFERENCES

Have you worked or attended school under any other names? Yes No

If yes, give names: _____

Are you presently employed? Yes No

If yes, whom do you suggest we contact? _____

Have you ever been fired from a job or asked to resign? Yes No

If yes, please explain: _____

Give two references, not relatives or former employers.

Name	Address	Years Known	Phone
------	---------	-------------	-------

AFFIDAVIT, CONSENT AND RELEASE

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. We reserve the right to terminate employment or refuse consideration of applicants based on criminal conviction according to management discretion.

I understand I may be required to successfully pass a drug screening examination, **REGARDLESS OF AMENDMENT 64**. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____

This application for employment will remain active for a limited time.
Ask the organization's representative for details.