



Employment Application

An Equal Opportunity Employer

Lake of the Pines is committed to providing equal employment opportunities for all applicants. Applicants will receive consideration for employment without regard to race, color, religion, sex, (including pregnancy), gender, gender identity, gender expression, genetic information, national origin, ancestry, age, physical or mental disability, marital status, sexual orientation, military or veteran status, or any other categories protected by law.”

Lake of the Pines’ policy is to make reasonable accommodations to the needs of job applicants and all employees who are disabled. Please notify the Human Resources Department if arrangements are required to accommodate your disabilities.

Lake of the Pines Association

11665 Lakeshore North, Auburn, CA 95602

(530) 268-1141

hr@lop.org

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (home): _____

(other): _____

Email: _____

General Information

1 Position applying for: _____

2 Are you applying for: *Check all that apply*
Regular full-time work?
Part-time work?
Seasonal/Temporary work?

3 Have you ever been known by another name?
 Yes No
If so, state name(s) _____

4 Are you over 18 years of age? Yes No

5 If under 18, can you provide a work permit after employment? Yes No

6 If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No

7 Are you related by blood or marriage to any person(s) employed by LOP? Yes No
If yes, please provide name and relationship:

8 Have you ever been employed by LOP? Yes No
If so, dates of employment: _____

9 How did you hear about this position? _____

Education and Training

10 If a license or certificate is a requirement of the position for which you are applying, and you possess the license or certificate, give the following information:
Title: _____ #: _____
Issued by: _____
Date Issued: _____ Date Expires: _____

12 Did you graduate from high school? Yes No

13 If no, do you have a GED certificate? Yes No

14 Indicate special skills you have which pertain to the position for which you are applying:

11 Colleges, vocational and business schools after high school:

Name of School	Major	No. of Years	Graduated?	Degrees

Employment History

List below all present and past employment starting with your most recent employer (**last seven years is sufficient**). Account for all periods of unemployment. **You must complete this section even if attaching a résumé.**

FROM MO / YR	EMPLOYER'S NAME		JOB TITLE AND DUTIES	
	ADDRESS		REASON FOR LEAVING	
TO MO / YR	PHONE	SUPERVISOR	MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE? Yes No	

FROM MO / YR	EMPLOYER'S NAME		JOB TITLE AND DUTIES	
	ADDRESS		REASON FOR LEAVING	
TO MO / YR	PHONE	SUPERVISOR	MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE? Yes No	

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Agreement

Please Read Carefully, Initial Each Paragraph and Sign Below:

- I certify that the information and responses I have provided on this application are true and correct. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of how much time passes before discovery.

- I hereby authorize Lake of the Pines Association to investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the Association any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Association, my former employers, and my references from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

- I understand that nothing contained in this application, or conveyed during any interview, or during my employment, if hired, is intended to create an employment contract between me and the Association. I understand and agree that if I am employed, my employment is for no set term and may be terminated at any time, with or without prior notice, by me or the Association.

Date

Applicant's Signature