

EMPLOYMENT HISTORY:

Company Dates City/State Supervisor/Phone
(Mandatory)

1) _____

Duties _____

Reason for Leaving _____

2) _____

Duties: _____

Reason for Leaving: _____

3) _____

Duties: _____

Reason for Leaving: _____

A) Have you ever been fired from a job? _____ Why? _____

B) Is there anything in your medical history that would affect your performance working at DAVE's? _____

If yes, please describe:

C) Is there anything else you would like to inform us about yourself? _____

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge, I authorize investigation of all statements contained in this application for employment as may be necessary on arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that any writing may not change this "at will" employment relationship. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, if hired I am required to abide by all rules and regulations of the employer and that employment will be subjected to the terms and condition's of Dave's Ski Shops, Dave's World, Inc.

Signature of Applicant

Date

DAVE'S WORLD INCORPORATED IS AN EQUAL OPPORTUNITY EMPLOYER