



MCCALL, IDAHO

AN AUTHENTIC MCCALL SPA

# EMPLOYMENT APPLICATION

An Equal Opportunity Employer

## Please Print

\_\_\_\_\_  
Date                      Last Name                      First Name                      Middle

\_\_\_\_\_  
Street Address                      City                      State                      Zip

(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_                      Email Address \_\_\_\_\_  
Home Phone

(\_\_\_\_\_) \_\_\_\_\_                      Desired Wage \_\_\_\_\_  
Alternate Phone (cell or message)

## Employment Desired

Position Applying For: \_\_\_\_\_

## Personal Information

Have you ever applied to or worked for Shore Lodge or Whitetail Club/The Cove?    \_\_\_ Yes \_\_\_ No

If yes, when? \_\_\_\_\_

Do you have any relatives working for Shore Lodge or Whitetail Club/The Cove?    \_\_\_ Yes \_\_\_ No

If yes, state name(s) and relationship:

\_\_\_\_\_  
Name                      Relationship

\_\_\_\_\_  
Name                      Relationship

Why are you applying for work at Shore Lodge/Whitetail Club/The Cove? \_\_\_\_\_

How did you hear about the position for which you are applying?

Newspaper  Employment Agency  Walk-In  Friend/Relative  Internet  Employee Referral (please indicate name of employee) \_\_\_\_\_

Some of our positions require that you are you 18 years old? Are you at least 18 years old?    \_\_\_ Yes \_\_\_ No

Some of our positions require that you have a current, valid driver's license? Do you have a current, valid driver's license?  
\_\_\_ Yes \_\_\_ No

Are you legally eligible for employment in the U.S.? \_\_\_ Yes \_\_\_ No (Proof of U.S. citizenship or immigration status will be required upon employment.

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?                      \_\_\_ Yes \_\_\_ No

(Note: We comply with ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Have you been convicted, pleaded guilty or pleaded nolo contendere to a crime? \_\_\_\_ Yes \_\_\_\_ No If yes, please explain fully and indicate the date of conviction. (Note: The existence of a criminal record does not constitute an automatic bar to employment.)

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Are you currently employed? \_\_\_\_ Yes \_\_\_\_ No If so, may we contact your current employer? \_\_\_\_ Yes \_\_\_\_ No

**Education, Training and Experience**

School	Name & Address	No. of years Completed	Did you Graduate?	Degree or Diploma
<b>High School</b>	_____	_____	_____	_____
	<i>Name of School</i>			
	_____			
	<i>Address</i>			
	_____			
	<i>City, State</i> <i>Zip</i>			
<b>College/University</b>	_____	_____	_____	_____
	<i>Name of College / University</i>			
	_____			
	<i>Address</i>			
	_____			
	<i>City, State</i> <i>Zip</i>			
<b>Vocational/ Business/Health</b>	_____	_____	_____	_____
	<i>Name of School</i>			
	_____			
	<i>Address</i>			
	_____			
	<i>City, State</i> <i>Zip</i>			

On what date would you be available to work? \_\_\_\_\_

Days and Hours Available: (If employed, I will notify my supervisor in writing, should my availability change.)

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

**Employment History**

List below all present and past employment starting with your most recent employer. Account for all periods of unemployment. *You must complete this section even if attaching a resume.*

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_____ Name of Business	(_____) _____ Telephone Number		
_____ Type of Business	_____ Your Supervisors Name		
_____ Address & Street	_____ City	_____ State	_____ Zip
Dates of Employment: _____ From To	Pay Rate: _____ Starting	_____ Ending	
_____ Your Position	_____ Duties		
_____ Reason for Leaving			
May we contact this employer for a reference?    ___ Yes ___ No			

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_____ Name of Business	(_____) _____ Telephone Number		
_____ Type of Business	_____ Your Supervisors Name		
_____ Address & Street	_____ City	_____ State	_____ Zip
Dates of Employment: _____ From To	Pay Rate: _____ Starting	_____ Ending	
_____ Your Position	_____ Duties		
_____ Reason for Leaving			
May we contact this employer for a reference?    ___ Yes ___ No			

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_____ Name of Employer	(_____) _____ Telephone Number		
_____ Type of Business	_____ Your Supervisors Name		
_____ Address & Street	_____ City	_____ State	_____ Zip
Dates of Employment: _____ From To	Pay Rate: _____ Starting	_____ Ending	
_____ Your Position	_____ Duties		
_____ Reason for Leaving			
May we contact this employer for a reference?    ___ Yes ___ No			

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\_\_\_\_\_  
Name of Employer

(\_\_\_\_\_) \_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Your Supervisors Name

\_\_\_\_\_  
Address & Street

\_\_\_\_\_  
City State Zip

Dates of Employment: \_\_\_\_\_  
From To

Pay Rate: \_\_\_\_\_  
Starting Ending

\_\_\_\_\_  
Your Position Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference? \_\_\_\_ Yes \_\_\_\_ No

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**Please Read Carefully and Sign Below**

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- I understand that employment is at-will and that I am free to resign at any time, and that the Company reserves the right to terminate my employment at any time, with or without cause and without prior notice. I also understand that no representative of the Company has the authority to make any assurances to the contrary.
- I understand and agree that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or immediate dismissal if employed.
- I authorize Shore Lodge/Whitetail/The Cove to solicit the information desired in connection with my application for employment. I realize that this investigation may include contacting my prior employers, supervisors, references, schools, etc. I authorize each individual and organization to release such information; and I release from all liability or responsibility all persons, schools, companies or organizations supplying such information.
- I understand that if I am employed by Shore Lodge/Whitetail/The Cove that confidential information may be available to me such as financial information, customer lists, pricing policies, operations, personnel and other information. I understand that this information must not be shared or used outside of the Company. In the event of termination of employment whether voluntary or involuntary, I hereby agree not to utilize or exploit this information with any individual or organization.
- I understand that Shore Lodge/Whitetail/The Cove is an Alcohol and Drug-Free Workplace. As a result, all employees are subject to reasonable suspicion and post accident/incident testing. Employees who violate this policy are subject to disciplinary action up to and including termination.
- I understand that employment with Shore Lodge/Whitetail/The Cove may be contingent upon the successful completion of a background check, including criminal history.
- I understand that I may be required to submit evidence of my credentials or licenses which may include a transcript from the schools that I have attended.
- I certify the information in this application form is correct and complete.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

Shore Lodge / Whitetail Club/The Cove  
Human Resources  
501 W Lake Street / McCall ID / 83638  
Fax: 208-634-7595