
Iowa Lakes Equestrian Riding Center

Volunteer Employment Application

Applicant Information

Date: _____

Applicant Name _____

Home Phone _____

Cell Phone _____

Email Address _____

Current Address:

Number and street _____

City _____

State & Zip _____

Drivers License Number _____ State _____

How were you referred to our program?: _____

Positions

Position(s) applying for (circle): Special Olympics Coach Farmhand
Human Service Professional

Are you applying for:

-
- Temporary part-time work – such as summer vacation work? [] Y or [] N
 - Part-time work throughout the year? [] Y or [] N

What days and hours are you available for work?

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

What date are you available to start work? _____

If applying for temporary work, when will you be available?

Can you work on the weekends? [] Y or [] N

Can you work Thursday evening? [] Y [] N or Friday evening? [] Y [] N

Personal Information:

If hired, would you have transportation to/from work? [] Y or [] N

Are you over the age of 19? [] Y or [] N

If under 19, do you have an adult who can work with you? [] Y or [] N

Do we have your permission to complete a police background check on you? [] Y
or [] N

Education, Training and Experience

Name and Address Of School - Degree/Diploma - Graduation Date

Skills and Qualifications: Licenses, Skills, Training, Awards

EMPLOYMENT HISTORY:

Present Or Last Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Reason for Leaving: _____

=====

Previous Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Reason for Leaving: _____

May We Contact Your Present Employer?

Yes _____ No _____

References (3 please):

Name/Title Address Phone

I certify that information contained in this application is true and complete. I understand that false information or gross misconduct may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature_____

Print Name_____