



MOHONK PRESERVE
P.O. Box 715
New Paltz, NY 12561-0715
Visitor Center 845-255-0919
Daniel Smiley Research Center 845-255-5969
www.mohonkpreserve.org

APPLICATION FOR EMPLOYMENT

Please read completely before filling out this application.

Mohonk Preserve, Inc. does not discriminate on the basis of race, color, religious creed, national origin, sex, marital status, veteran status, disability, or status with regard to public assistance. No information obtained in connection with this application will be used in any such manner.

In submitting this application, the undersigned agrees as follows:

1. I voluntarily give my consent to Mohonk Preserve, Inc. to make a thorough investigation of my past employment.
2. In the event of my employment with Mohonk Preserve, Inc. I will comply with Mohonk Preserve's Personnel Policy. I specifically agree that all photographs, products, artwork, writing, plans or other materials developed by me or in which I am involved while employed by Mohonk Preserve, and any related or resulting copyrights or trademarks, will be owned solely by Mohonk Preserve, Inc.

I certify that all statements made by me in this application are true and complete to the best of my knowledge, and that I have withheld nothing that, if disclosed, would affect this application unfavorably. I understand that if I am employed by Mohonk Preserve, Inc. any false statement on this employment application shall be considered sufficient cause for dismissal. In connection with this application form, Mohonk Preserve, Inc. may obtain a criminal background check of the applicant. Conviction records will not be used as an absolute bar to employment.

I hereby acknowledge that I have read the above and understand and agree to it.

Please answer every question. Please print with pen or type.

Name _____
Last First Middle

Phone number: _____

Email: _____

Address:

Length of time
at this address

(years)

List previous address within the United States, except military, if address changed during the past 5 years.

Street City State Zip From (date) To

JOB INTEREST

Position(s) applying for _____ Salary requirements _____

Do you have any disability or handicap that would affect your job performance or attendance? Yes [] No []

How were you referred to us? _____ Date available for work _____

Date must leave job (if seasonal/temporary) _____

List any friends or relatives working for us and state relationship. _____

Work schedule preference: Please indicate first, second, and third choices in the space provided:

Would you work: Permanent Permanent Temporary Temporary
 Full-Time ____ Part-Time ____ Full-Time ____ Part-Time ____ Day ____ Evening ____

Were you previously employed here? If so, date(s) worked _____

Reason(s) for leaving: _____

EMPLOYMENT HISTORY

Start with your present position and work back.

1.

Company Name		From	Job Title
Address		To	Job Duties
City	State	Zipcode	
Supervisor Name / Phone Number			Reason for Leaving

2.

Company Name		From	Job Title
Address		To	Job Duties
City	State	Zipcode	
Supervisor Name / Phone Number			Reason for Leaving

3.

Company Name		From	Job Title
Address		To	Job Duties
City	State	Zipcode	
Supervisor Name / Phone Number			Reason for Leaving

4.

Company Name		From	Job Title
Address		To	Job Duties
City	State	Zipcode	
Supervisor Name / Phone Number			Reason for Leaving

May we contact the above listed employers? Yes No

If "no" check which one(s) you do not wish us to contact
 1 2 3 4

Please write a brief statement in which you express the kind of work you desire and how it will relate to your long-term career goals.

Signature _____

Date _____

EDUCATION HISTORY

<i>School</i>	<i>Name and Address of School</i>	<i>Course of Study</i>	<i>Check the last year completed</i>	<i>Did You graduate?</i>	<i>List diploma or degree</i>
Elementary			<input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8		
High School			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		
College			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		
Military Educ/Rank			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		
Other (specify)			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		

PERSONAL REFERENCES

(Not former employers or relatives, but people who have definite knowledge of your qualifications and fitness for the position for which you are applying)

Name & Occupation	Address	Daytime Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

CRIMINAL OFFENSES

Have you ever been convicted of a criminal offense involving dishonesty or breach of trust (including but not limited to robbery, embezzlement, forgery, perjury, tax evasion, etc.?)

Yes No If Yes, explain in full:

JOB SKILLS

The following list of job related skills may be useful in connection with a position with Mohonk Preserve, Inc. Please indicate skill competency by indicating the appropriate skill level as per the following:

- 1 = No experience or training
- 2 = Beginning level; limited exposure and training
- 3 = Average level of performance; work independently
- 4 = Advanced level of experience, training; have handled complex situations
- 5 = Certified instructor, or have experience as an instructor or supervisor

<u>Skill Description</u>	<u>Skill Level</u>
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Tour guide experience (i.e., ability to prepare and conduct tours)	[]
Experience as a leader or counselor in a day or formal recreational program or activity	[]
Carpentry skills	[]
Use of shop tools (i.e., radial arm saw, drill, planer, etc.)	[]

Specify: _____

Trail building. Explain: _____	[]
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Surveying	[]
Use of chainsaw	[]
Use of common fire tools (shovel, fire rake, axe, portable pump)	[]
Wildland fire suppression	[]
Ability to identify and correct minor motor vehicle malfunctions (change tires, replace fan belt, jump-start, etc.)	[]
Ability to operate equipment such as farmequipment, heavy duty vehicles, off-road 4wd vehicles, etc.	[]
Specify: _____	

Natural resource management/rehabilitation (check type of experience)	
Fire management	[]
Vegetation management	[]
Taxonomy (flora/fauna)	[]
Plant or forest ecology	[]

Technical rock climbing	[]
What grade do you:	
Lead _____	
Follow _____	
Experience in Search and Rescue	[]
Experience in litter evacuation from high-angle rock	[]
Skiing: cross-country	[]
Outdoor experience/training (i.e. backpacking, hiking, camping)	[]
Handling human relations under stress (i.e. dealing with disorderly people)	[]

Do you hold a valid driver's license? Yes No

Are you able to use a manual transmission? Yes No

Are you currently certified in: Advanced First Aid Basic First Aid EMT CPR

Give expiration dates: _____