



CIVIL WAR CAVE

Application for Employment at Smallin Civil War Cave

3575 N. Smallin Road ~ Ozark, MO 65721 ~ 417-551-4545

Smallin Civil War Cave is an Equal Opportunity Employer. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

PLEASE TYPE OR PRINT. Complete the entire application. You may attach a resume, but please still complete the questions to the best of your ability.

Position Applying For: Cave Staff	Name (Last, First, Middle):		
Street Address:		City, State & Zip:	
Social Security Number:	Home Phone:	Work Phone:	
Are you eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If NO, what is your current age?	
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, State of issuance, license #, and expiration date:	

EDUCATION:

Name of School	City/State	Did you graduate?	If No, # of years left to graduate	If Yes, date of Graduation	Major
High School:					
GED:					
Other School:					
College:					

SKILLS: As a Smallin Civil War Cave employee, basic job skills would include but not be limited to: leading and teaching groups through the cave, leading a school group in a variety of activities offered, using a QuickBooks-based cash register system, and general cleaning of the gift shop areas (cleaning, dusting, sweeping, etc.).
Please list technical skills, clerical skills, trade skills, etc., relevant to this position.

WORK EXPERIENCE: If necessary, attach a separate page or resume for work references and job details.

PLEASE NOTE: Smallin Civil War Cave reserves the right to contact all current and former employers for reference information.

1.Dates Employed (most recent position): From: To:	Title:	Primary duties:
	Reason for Leaving:	
Supervisor's Name & Phone #:	Organization Name and Address:	
2.Date Employed: From: To:	Title:	Primary duties:
	Reason for Leaving:	
Supervisor's Name &, Phone #:	Organization Name and Address:	
3.Date Employed: From: To:	Title:	Primary duties:
	Reason for Leaving:	
Supervisor's Name & Phone #:	Organization Name and Address:	

PERSONAL REFERENCES:

Name:	Relationship to Applicant:	Contact Information:

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Smallin Civil War Cave to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of Smallin Civil War Cave serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off.

Applicant Signature: _____

Date: _____