



White Mountains Attractions Association  
 P O Box 10 North Woodstock, NH 03262-0010  
 603-745-8720 · 603-745-6765 Fax  
 E-Mail: info@visitwhitemountains.com



(PLEASE PRINT)

Date of Application \_\_\_\_\_

Position Applied For \_\_\_\_\_

\_\_\_\_\_  
LAST FIRST MIDDLE INITIAL  
 Address \_\_\_\_\_  
MAILING STREET TOWN STATE ZIP CODE

Telephone ( ) \_\_\_\_\_ Social Security Number \_\_\_\_\_

How did you hear about this job opportunity? \_\_\_\_\_

If employed and you are under 18, can you furnish a work permit? \_\_\_\_\_

Are you employed now?  No  Yes May we contact your present employer  No  Yes

On what date are you available for work? \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Do you have your own transportation?  No  Yes.

Do you have a Salary Requirement:  No  Yes, \$ \_\_\_\_\_

Person to notify in case of emergency:

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
LAST FIRST MIDDLE INITIAL

Address \_\_\_\_\_  
MAILING STREET TOWN STATE ZIP CODE

EDUCATION				
	Elementary	High	College/University	Graduate/Professional
School Name				
Years Completed: (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study or Specialized Training, Apprenticeship, or Skills:				

Have you even been convicted of a felony?  No  Yes If yes, provide details here:

\_\_\_\_\_

Why do you feel you would be appropriate for this job?

\_\_\_\_\_

---

Give name, address and telephone number of three references who are not related to you and are not previous employers.

---

---

---

Do you, or have you ever known anyone who works or worked at White Mountains Attractions, or Lost River Gorge?  No  Yes If yes, please list here: \_\_\_\_\_

**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 in arriving at an employment decision. I understand that a background check may be conducted, including a review of my online sources and social media outlets. I understand that this application is not, and is not intended to be a contract of employment.

I understand that, for jobs which require driving, my Motor Vehicle records will be obtained and reviewed.

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, that I am required to abide by all rules and regulations of the Company.

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Signature of parent or guardian (if under 18) Date

For Personnel Department Use Only	
Arrange Interview	<input type="checkbox"/> Yes <input type="checkbox"/> No
Remarks	_____
	_____ Interviewer Date
Employed	<input type="checkbox"/> Yes <input type="checkbox"/> No Date of Employment _____
Job Title	_____ Hourly Rate/Salary _____
By	_____ Date
	Name and Title

# EMPLOYMENT EXPERIENCE

Employer	Telephone ( )	<u>Dates Employed</u> From                  To	Work Performed
Address			
Job Title		<u>Hourly Rate/Salary</u> Starting                  Final	
Supervisor			
Reason for Leaving			
Employer	Telephone ( )	<u>Dates Employed</u> From                  To	Work Performed
Address			
Job Title		<u>Hourly Rate/Salary</u> Starting                  Final	
Supervisor			
Reason for Leaving			
Employer	Telephone ( )	<u>Dates Employed</u> From                  To	Work Performed
Address			
Job Title		<u>Hourly Rate/Salary</u> Starting                  Final	
Supervisor			
Reason for Leaving			
Employer	Telephone ( )	<u>Dates Employed</u> From                  To	Work Performed
Address			
Job Title		<u>Hourly Rate/Salary</u> Starting                  Final	
Supervisor			
Reason for Leaving			

If you need additional space, please continue on the back of this sheet.