



Team RV Management

16458 Bolsa Chica Street, #565, Huntington Beach, CA 92649-2603
Phone: 714-840-8011 · Fax 888-411-7838 · www.teamrvmanagement.net
Human Resources - Phone: 949-233-2692 · Fax: 888-317-9010



EMPLOYMENT APPLICATION

POSITION INFORMATION *(Please print or type clearly)*

POSITION DESIRED: *(check all that apply)*

LOCATION DESIRED: *(check all that apply)*

Reservation/Store Clerks	<input type="checkbox"/>	Restaurant Cook	<input type="checkbox"/>	Hat Creek RV	<input type="checkbox"/>	RV World Campground	<input type="checkbox"/>
Store/Marina	<input type="checkbox"/>	Deli Service	<input type="checkbox"/>	High Sierra RV	<input type="checkbox"/>	The Redwoods RV	<input type="checkbox"/>
Maintenance	<input type="checkbox"/>	Waitress/Waiter	<input type="checkbox"/>	Loon Lake Lodge	<input type="checkbox"/>	Yosemite Pines RV	<input type="checkbox"/>
Housekeeping	<input type="checkbox"/>	Activities	<input type="checkbox"/>	McCloud Dance Country	<input type="checkbox"/>		

PERSONAL INFORMATION *(Please print or type clearly)*

NAME: _____
(First) (MI) (Last)

ADDRESS: *(Please print or type clearly)*

(Current) _____

(Seasonal) _____

CONTACT INFO:

(Phone) _____ *(Cell/Message)* _____ *(Email)* _____

EMERGENCY CONTACT INFO:

(Name) _____ *(Phone)* _____

EMPLOYMENT & SKILL INFORMATION *(Please print or type clearly)*

Have you ever applied for employment with us before? Yes No If Yes, please give date _____

Have you ever worked for Team RV? Yes No If Yes, what Year/s _____ Location _____

Are you at least 18 years of age? Yes No Will you accept part-time employment? Yes No

Will you accept seasonal employment? Yes No If Yes, From _____ To _____

Will your spouse/partner be applying for employment with Team RV? Yes No If Yes, Name _____

List all valid Certificates you currently hold, in which state and expiration dates: CPR _____

First Aid _____ Life Guard _____ Propane _____

Liquor Control Service Permit _____ Food Handlers Permit _____

Other _____ Other _____

In accordance with Federal and State Law, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. (Not all prohibited bases apply to all programs.) To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). Team RV Management is an equal opportunity employer.

BUSINESS or PERSONAL REFERENCES *(Please print or type clearly)*

List persons who have first-hand knowledge of your work performance in the last three years or can provide a character reference.

NAME & ADDRESS:	PHONE #	OCCUPATON	RELATIONSHIP
1.			
2.			
3.			

OTHER INFORMATION *(Please print or type clearly)*

Are you able to perform the essential duties and tasks of the position for which you are applying? Yes No

If "NO", please describe the duties and tasks that cannot be performed: _____

Please list your previous work experience, with emphasis on campgrounds and other relevant experience

Have you ever been convicted of a Felony within the last 7 years? Yes No If "Yes" please explain below:

(Conviction will not necessarily disqualify applicant for employment)

ACKNOWLEDGEMENT *(Please read clearly)*

I hereby certify that the information contained in this application form and in any supplemental attachments are true and correct to the best of my knowledge and that I have not knowingly withheld any information that might adversely affect my chances for employment. I understand that any misrepresentation, falsification or material omission of material fact on this application or on any supplemental attachments used to secure employment shall be grounds for rejection of this application or for discharge if I am employed, regardless of the time lapsed before discovery.

I hereby authorize Team RV Management to investigate my references, as well as to independently verify any information in this application. Furthermore, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to Team RV Management as well as from the use or disclosure of such information by Team RV Management or any of its agents, employees or representatives.

I understand and agree that if employed, the employment will be "at will". That is, either Team RV Management or I may end the employment relationship at any time, for any reason. I understand the receipt of this application by Team RV Management does not imply employment and that this application and/or any other Team RV Management documents are not contracts of employment. Nothing contained in the application or conveyed during an interview that may be granted is intended to create an employment contract between Team RV Management and me and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by a designated representative of Team RV Management and me.

In the event of any dispute or claim between myself and the company (including its employees, managers, supervisors, agents, successors and assigns) including, but not limited to, claims arising from or related to our employment or the termination of our employment, I agree to submit all such disputes to confidential binding arbitration under the Federal Arbitration Act. This provision has no application to claims of workers' compensation or unemployment benefits available through a state agency.

Applicant Signature: _____ **Date:** _____



Team RV Management

16458 Bolsa Chica Street, #565, Huntington Beach, CA 92649-2603

Phone: 714-840-8011 · Fax 888-411-7838 · www.teamrvmanagement.net

Human Resources - Phone: 949-233-2692 · Fax: 888-317-9010



SUPPLEMENTAL QUESTIONNAIRE Campground Services

1. What type of RV Unit will be used by applicant? (5th Wheel, Travel Trailer, Motorhome, Other) Please describe size and type below. If possible, please provide a photo of your RV Unit.

2. If you do not have an RV Unit, then please describe how you plan on maintaining a residence.

3. Can your unit be self-contained? If not then list the utilities that are required (electric, water, sewer). Utilities may be limited in certain locations.

4. Will you have an additional vehicle? (State "yes" or "no" and type)

5. Do you have or plan on having a pet? (State "yes" or "no") If "yes", state number of pets, size and habits.

6. Are you limited to the number of hours you can work? (Please describe)

7. Are you willing to clean toilets and campsites? Why do you feel that cleaning these facilities are important?

8. What does "Customer Service" mean to you?

9. How did you learn about applying with Team RV Management?

Please attach any additional information, including résumé that will help us assess your qualifications.

Applicant Signature: _____ **Date:** _____