Mild to Wild Rafting and Jeep Tra 50 Animas View Dr. Durango, CO 81301 800-567-6745 www.Mild2WildRafting.com Please return to: admin@mild2wild APPLICATION FOR EMI	lrafting.com	EST. 1996 Rafting & Jeep Tours Live your Adventure
DATE OF APPLICATION:		
PERMISSION TO COMPLETE A B	ECKS AND DRUG TESTING FOR MOST ACKGROUND CHECK AND DRUG TEST OPENING? MOAB	T:
EMPLOYMENT DESIRED (C	Tircle one or more):	
Raft Guide (must be 18+)	4x4 DRIVER (must be 25+)	BUS DRIVER (must be 18+)
DATE YOU CAN START;	END DATE:	
WAGE DESIRED WORK DAYS AVAILABLE (CIRCLE	Or Y IF YES SPECIFY CLASS SCHEDULE E ALL THAT APPLY): M T W TH F HIRE BASED ON VACATION DATES SO BI	S SU
PERSONAL INFORMATION		
NAME:		
PRESENT ADDRESS:		
CITY	STATE	_ ZIP CODE
PERMANENT ADDRESS:		
CITY	STATE	_ ZIP CODE
PHONE NUMBER:	CELL PHONE:	
E-MAIL:		
DO YOU CHECK YOUR EMAIL REC	GULARLY? YES NO	
GENERAL INFORMATION		
SKILLS THAT WOULD BE VALUAE	BLE TO MILD TO WILD:	

DO YOU HAVE A DRIVER'S LICENSE? YES NO		
IF SO, LIST THE STATE AND NUMBER		
ARMED SERVICES?:	RANK:	
HAVE YOU EVER BEEN CONVICTED OF A FELONY?	YES NO	
IF YES, PLEASE DESCRIBE CONDITIONS OF THE OFFE	ENSE:	
IF HIRED, ARE YOU WILLING TO SUBMIT A BACKGRO	DUND CHECK & CREDIT REPORT? YES N	0
WHY DO YOU WANT TO WORK AT MILD TO WILD RA	FTING & JEEP TRAIL TOURS, INC.?	

EDUCATION HISTORY

NAME OF SCHOOL	DATES OF ATTENDANCE	DID YOU GRADUATE?	MAJOR	GPA
HIGH SCHOOL:				
COLLEGE/TRADE SCHOOL:				

ARE YOU CURRENTLY EMPLOYED: YES NO

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER: YES NO

HAVE YOU APPLIED TO THIS COMPANY BEFORE? YES NO

WHEN?_____ WHAT POSITION?_____

FORMER EMPLOYERS (CONTACT INFO MUST BE COMPLETE, ESPECIALLY PHONE & EMAIL!)

COMPANY	SUPERVISOR'S NAME
JOB DUTIES	
SUPERVISOR'S EMAIL	PHONE NUMBER
DATES (MONTH/YEAR) FROM:TO: _	POSITION
WAGE REASON FOR LEAVING	
CAN WE CONTACT THIS EMPLOYER: YES	NO
COMPANY	SUPERVISOR'S NAME
JOB DUTIES	
SUPERVISOR'S EMAIL	PHONE NUMBER
DATES (MONTH/YEAR) FROM:TO:	POSITION
WAGE REASON FOR LEAVING	
CAN WE CONTACT THIS EMPLOYER: YES	NO

COMPANY	SUPERVISOR'S NAME
JOB DUTIES	
SUPERVISOR'S EMAIL	PHONE NUMBER
DATES (MONTH/YEAR) FROM:TO:PO	OSITION
WAGE REASON FOR LEAVING	
CAN WE CONTACT THIS EMPLOYER: YES NO	
IF STUDENT: PLEASE LIST 3 TEACHER RE If not a student, we will use your past employers as PROFESSOR:	references.
E-MAIL:	
PROFESSOR:	PHONE:
E-MAIL:	
PROFESSOR:	PHONE:
E-MAIL:	
FOR EXPERIENCED RIVER GUIDE EMPLOY WHEN AND WHERE DID YOU GET THE CERTIFICATION	YMENT ONLY:
WHAT WE NEED FROM YOU: PLEASE SUBMIT WITH A	
0 IF COLORADO, PLEASE SUBMIT WITH APPLICATIO	ON YOUR MINIMUM GUIDE QUALIFICATION FORMS
	TATE TRAINED FORM AND SUBMIT WITH APPLICATION
	rograms/BoatingProgram/RiverOutfitters/OOS_Guide_Qual.pdf
• Also send in your <u>Commercial</u> River Log	
LIST NUMBER OF COMMERCIAL RIVER MILES:	PRIVATE TRIP RIVER MILES: TOTAL MILES:
Please Provide Copies of Safety Certifications (First Aid, W	vilderness First Aid, CPR, Swiftwater) with your application:
EXP	IRATION DATE:

EXPIRATION DATE: _____

EXPIRATION DATE: _____

FOR JEEP DRIVER EMPLOYMENT ONLY:

DO YOU HAVE A	CLEAN DRIVING RECORD.	IF NOT EXPLAIN?
DO IOU III VL N	CLLIN DRIVING RECORD,	, II HOT LATLANT.

WHAT WE NEED FROM YOU: PLEASE SUBMIT WITH APPLICATION.

- COPY OF YOUR DRIVER LICENSES
- 0 COPY OF YOUR DRIVING RECORD (CAN GET AT DMV)
- MEDICAL EXAMINATION CARD (IF AVAILABLE)
- 0 FIRST AID/CPR (IF AVAILABLE)

LIST ANY PRIOR DRIVING EXPERIENCE YOU HAVE, IF ANY:_____

FOR BUS DRIVER EMPLOYMENT ONLY:

DO YOU HAVE A COMMERCIAL DRIVER LICENSE?

WHAT CLASS AND ENDORSEMENTS? _____

DO YOU HAVE A CLEAN DRIVING RECORD, IF NOT EXPLAIN?

WHAT WE NEED FROM YOU: PLEASE SUBMIT WITH APPLICATION.

- 0 COPY OF YOUR DRIVER LICENSES
- COPY OF YOUR DRIVING RECORD (CAN GET AT DMV)
- 0 MEDICAL EXAMINATION CARD (IF AVAILABLE)

LIST ANY PRIOR DRIVING EXPERIENCE YOU HAVE, IF ANY:_____

Employee Authorization to Release Records

I understand and agree that:

The information supplied was submitted by myself, and all information is true and correct, to the best of my knowledge. I understand that false or misleading information given in my application and/or interview(s) will be considered as cause for possible dismissal and/or discharge. I also understand that I am to abide by all rules and regulations of the company. The company has my authorization to thoroughly investigate my work and personal history. I understand that the information supplied by me, regarding my: Employment History, Education (including an authorization to release transcripts), Credit History, Criminal History, Medical and Professional Licensing, Motor Vehicle Record(s), Residence History, and References, will be utilized as part of the processing procedures. A background check will be conducted to verify the veracity of the information submitted and will be utilized to develop information concerning my character, general reputation, personal characteristics, and mode of living. I will hold no person liable for giving or receiving information in this investigation. I hereby authorize SentryLink LLC an agent of Mild to Wild to make a thorough check of my past Employment, Education, and activities.

I release from liability all persons, companies, and corporations supplying that information.

I release and indemnify Mild to Wild and SentryLink LLC against any liability that might result from making such background checks. A copy of this form is as valid as the original.

EMPLOYEE/APPLICANT

Last Name	First Name	Middle		
Social Security Number	/ Date of B	/ irth MM/DD/YR		
Other Name(s) Maiden/Married				
Driver's License Number	State			
RESIDENCES (Starting with current))			
Street Address How Long?		City/State	Zip	
Street Address How Long?		City/State	Zip	

EMPLOYMENT

Current Employer			
City/State/Zip	Phone Number		
Position			
May we contact current employer? Yes No			
Previous Employer			
City/State/Zip	Phone Number		
Position			
May we contact previous employer? Yes No			
SCHOOL(S) ATTENDED High School			
Name of School	City/Sta	ate	
College			
Name of School	City/State	Dates Attended	Year Graduated
Other			
Name of School	City/State	Dates Attended	Year Graduated
The following information is used for identification a discriminatory under EEOC guidelines.	and statistical purposes. It	is not used in any ma	anner considered
Date of Birth/ Race _		Sex	
Telephone ()			
Signature	Date Sig	gned	