

# Indiana Zipline Tours Guide Application

**General Information**

Date \_\_\_\_\_

Name \_\_\_\_\_

SSN \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Please answer "yes" or "no" to the following questions.

Are you at least 18 years of age..... Yes  No

Have you ever been arrested or convicted of a felony..... Yes  No

Are you eligible for employment in the United States ..... Yes  No

Have you ever been fired from a job..... Yes  No

Do you speak another language other than English..... Yes  No

Do you have a reliable source of transportation..... Yes  No

Are you in good health condition without injury..... Yes  No

Are you afraid of heights..... Yes  No

Are you currently in school..... Yes  No

If yes, where do you attend? \_\_\_\_\_

What is your experience in zipline activities?

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How would you describe your personality?

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What are your personal strengths, gifts and talents?

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## Availability

- Date that you are available to start:

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- Are you currently working:

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- What is your availability during the week and weekends?

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### **JOB INFORMATION**

How did you learn about Indiana Zipline Tours?

Please describe in detail how many hours you are looking to work per week and what your availability will be throughout the week.

Hours per week:

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

What date are you available to start?

What date will you no longer be available to work?

Please describe any zipline or high ropes experience that you may have, including resident/day camps, years of experience, positions held, etc.

## Training and Leadership Experience

List relevant training and certifications (ex. CPR, First Aid, NOLS, Customer Service, Climbing etc.)

Type of Training/Certification	Date Completed	Company/Organization	Expiration Date

## Education History

Name of School	Years Attended	Major/Minor	Degree	Graduated
High School				
College/ University				
Graduate or other				

## **PREVIOUS EMPLOYMENT**

Company		Phone (    )		
Address		Supervisor		
Job Title	Starting Salary	\$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference?		YES	NO	
Company		Phone (    )		
Address		Supervisor		
Job Title	Starting Salary	\$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference?		YES	NO	
Company		Phone (    )		
Address		Supervisor		
Job Title	Starting Salary	\$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference?		YES	NO	

**Applicant's Agreement:**

Please read carefully before signing.

I \_\_\_\_\_, verify that the above information, to my knowledge is accurate and up to date. I hereby authorize Indiana Zipline Tours and its subsidiaries to use this information for the purposes of verification and documentation for employment with the organization. I acknowledge that by signing this document I have given up certain rights of privacy and protection, releasing them to the organization for the applicable uses.

I authorize Indiana Zipline Tours to contact any former employer and references to insure the fulfillment of the hiring needs.

APPLICANT'S SIGNATURE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

DATE: \_\_\_\_\_