



NAME \_\_\_\_\_  
 TELEPHONE# \_\_\_\_\_ Cell# \_\_\_\_\_  
 E-Mail \_\_\_\_\_

**Appearance:**

Swiss Valley is a family-oriented business. It is important that our image and professionalism be maintained. No obscene, vulgar, or profane language, which includes text and images on clothing. Also no excessive, offensive, obscene tattoos visible. I may be asked to take a drug test. Any deviation from these codes may result in your dismissal. This area of criticism may become offensive to you, you must realize that it is a business accommodation and not meant to be personal.

Swiss Valley requires black snowpants. You may also be asked to purchase clothing items to meet departmental dress codes and standards.

It is important that our image and professionalism be maintained. Any deviation from these codes may result in your dismissal.

**Wages:** Paid bi-weekly. After 6 months, any uncashed payroll checks will be considered donated to our "Ski Dollars At Work Fund".

**NOTICE TO INSTRUCTORS:** Please be advised that although a written attendance schedule is published based on your own submitted working schedule, you are only considered "on the job" at the time you have been assigned a lesson by the acting Ski School Duty Director, and until the completion of that assigned lesson. Immediately after completion of each assigned lesson, you are expected to report back to the Ski School Duty Director and fill out your pay sheet with all pertinent requested lesson information. Payment you receive as an employee is for the completion of assigned lessons only. If you have not been assigned a lesson or duty by the Ski School Duty Director, be further advised that you are considered on your own time, and if you choose to free ski or snowboard, you are doing so at your own risk.

**By signing this application below you are agreeing to these terms.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Please indicate your available days and hours to work:**

|       | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|-------|--------|--------|---------|-----------|----------|--------|----------|
| From: |        |        |         |           |          |        |          |
| To:   |        |        |         |           |          |        |          |

**Please send this completed and signed application to: [Snowsports@SkiSwissValley.com](mailto:Snowsports@SkiSwissValley.com) or by mail to:  
 SnowSports  
 Swiss Valley Ski & Snowboard Area  
 13421 Mann St.  
 Jones, MI 49061**

If you have a resume, please include that with your application.

Applications are reviewed upon receipt.

Our SnowSports staff will contact you the orientation dates and/or a personal interview request.



How many seasons have you been skiing/snowboarding? \_\_\_\_\_

On a scale of 1 being beginner and 10 being expert, how do you rate your skiing/snowboarding ability? \_\_\_\_\_

Have you ever been involved with teaching individuals with disabilities? YES NO  
If YES, give details \_\_\_\_\_

Are you available Monday thru Friday from 9am to 5pm? YES NO  
If NO, give details \_\_\_\_\_

Are you available any single days Monday thru Friday? YES NO  
If YES, give details \_\_\_\_\_

Could you be available Mon thru Fri, 9am to 5pm, for SPECIAL EVENTS ONLY - 3 to 5 days per season?  
YES NO

Are you available Saturday and Sunday? YES NO  
If NO, give details \_\_\_\_\_

Are you available Holidays? YES NO Christmas Break? YES NO  
If NO, give details \_\_\_\_\_

Please list any other qualifications you have that you feel would be an asset to our Ski School: \_\_\_\_\_

REFERENCES (Please do not list relatives.)

| Name | Phone # | Business/Occupation | Years Known |
|------|---------|---------------------|-------------|
| 1.   |         |                     |             |
| 2.   |         |                     |             |
|      |         |                     |             |

Do you have any physical disabilities or previous injuries that would impair your ability to ski/snowboard or instruct others? YES NO  
If yes, please explain: \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_  
name address phone

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages or salary, be terminated at any time without any previous notice.

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

**JR. INSTRUCTORS ONLY**

Can you work every weekend: YES NO If NO, Why \_\_\_\_\_

Can you work every day of Christmas Break YES NO If No, why \_\_\_\_\_