



176 Hwy 71 South, PO Box 488
Arnolds Park, IA 51331
(712)332-2701
www.oakhillmarina.com



2188 Hwy 86
Milford, IA 51351
(712)337-6440
www.oakhilloutdoor.com

Application for Employment

Position Applied for		Date of Application	
How did you learn about us?			
Last Name		First Name	Middle Name
Address		City	State Zip
Home Phone		Mobile Phone	

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes ☐ No ☐

Have you ever filed an application with us before?

Yes ☐ No ☐

Are you currently employed?

Yes ☐ No ☐

May we contact your present employer?

Yes ☐ No ☐

Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration Status?

Yes ☐ No ☐

(Proof of citizenship or immigration status will be required upon employment)

On what date would you be available for work? _____

Are you available to work:

Full Time ☐
Part Time ☐

Temporary ☐
Shift Work ☐

Are you currently on "lay-off" status and subject to recall?

Yes ☐ No ☐

Can you travel if a job requires it?

Yes ☐ No ☐

Have you been convicted of a felony within the last 7 years?

Yes ☐ No ☐

(Conviction will not necessarily disqualify an applicant from employment.)

If Yes, please explain: _____

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Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate College				
Other (Specify)				

Describe any specialized training, apprenticeship, skills and extra-curricular activities

Summarize special job-related skills and qualifications acquired from employment, military training, or other experience

Computer Experience: (Check all that apply)

Microsoft Windows
 Microsoft Word
 Microsoft Excel
 Other

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Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin,

Employer		Starting		Work Performed
		From	To	
Address				
Telephone Number(s) (Cell) (Home)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Starting		Work Performed
		From	To	
Address				
Telephone Number(s) (Cell) (Home)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Starting		Work Performed
		From	To	
Address				
Telephone Number(s) (Cell) (Home)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Starting		Work Performed
		From	To	
Address				
Telephone Number(s) (Cell) (Home)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

(If you need more space, please continue on a separate piece of paper.)

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Additional Information

State any additional information you feel may be helpful to us in considering your application.

References:

1.)	()
(Name)	Phone #
(Address)	(City) (Zip)
2.)	()
(Name)	Phone #
(Address)	(City) (Zip)
3.)	()
(Name)	Phone #
(Address)	(City) (Zip)

I certify that the 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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applicants are being accepted at the time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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 employer.

Signature of Applicant

Date

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