



LAKE GEORGE STEAMBOAT COMPANY

Steel Pier • P.O. Box 551 • Lake George, NY 12845 • (518) 668-5777

1. NAME AND LOCAL ADDRESS First M.I. Last Street City State Zip Code	Home Phone Business/School Phone	7. Position Desired: <input type="checkbox"/> DECK <input type="checkbox"/> PARKING <input type="checkbox"/> TICKETS <input type="checkbox"/> GIFT SHOP <input type="checkbox"/> BARTENDER <input type="checkbox"/> SNACK BAR <input type="checkbox"/> WAIT STAFF <input type="checkbox"/> COOK <input type="checkbox"/> DISHWASHER <input type="checkbox"/> Photography <input type="checkbox"/> Boardwalk <input type="checkbox"/> HOSTESS Preference <input type="checkbox"/> BUSSERS
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2. LEGAL RESIDENCE (if different from above address) Street City State Zip Code	8. Date available to begin: _____ PART TIME _____ FULL TIME WEEKENDS YES _____ NO _____
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4. Do you have a Driver's License? <input type="checkbox"/> YES <input type="checkbox"/> NO	New York State Law Against Discrimination prohibits discrimination because of age. 5. Are you between the ages of 18 and 65? <input type="checkbox"/> YES <input type="checkbox"/> NO	9. Date available to work until: _____ PART TIME _____ FULL TIME WEEKENDS YES _____ NO _____
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6. NOTIFY IN CASE OF EMERGENCY			
First	M.I.	Last	Telephone No.
Street	City	State	Zip Code

10. EDUCATION

Please circle the last year of school you have completed K 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

	Graduate		Major Subject	Credits	Degree/Year
	Yes	No			
College					
Other					
Job Related Skills					

11. List present and past employment for last 5 years (use "Applicant's Remarks" space on back if additional space is needed.)

Employer	Address	Weekly Salary	Employed From To
Reason for Leaving			
Explain Duties			
Employer	Address	Weekly Salary	Employed From To
Reason for Leaving			
Explain Duties			

LACI FORMS, LINDI FORMS

Have you ever been convicted of a criminal offense (do not include parking tickets)? Yes No (Conviction is not an automatic bar to employment)

If Yes	DATE	NATURE OF CONVICTION	WHERE	DISPOSITION OF OFFENSE

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW

I further declare that the answers to the questions on the opposite side are correct and that any misstatement of fact or omission should be cause for dismissal or rejection. I authorize the company to contact any of my previous employers as well as any reference source in order to verify the facts and information I have furnished regarding my qualifications and character. I hereby authorize any person(s) having knowledge thereof to provide such information to the company, and I hereby release from liability and agree to hold harmless any person that furnishes such information in good faith. I authorize the company to supply my employment record in whole or part and in confidence to any employer, insurance agency, or other party with a legal and proper interest, and I hereby release the company from any liability and agree to hold harmless any employee of the company who furnishes such information. I further understand that my employment is for no fixed time and may be discontinued with or without cause or notice by myself or the company. I understand that no employee or officer or agent of the company may bind it by oral or printed statements, including handbooks, benefit books, or bulletins, contrary to the above.

SIGNATURE OF APPLICANT

DATE

Applicant's Remarks:

EQUAL OPPORTUNITY EMPLOYER M/F/H