ESTES VALLEY RECREATION AND PARK DISTRICT APPLICATION for WORKCAMPERS

Each person must submit his/her own application. Please fill out all sections as thoroughly as possible, as this will help us place you in a position that best suits you. If applying with another person, please submit applications together. Include resume(s) if you wish.

Position Applying for: Camp Store/Camp Host Campgrounds Maintenance Worker Golf Pro Shop Attend	lant
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Application for the _	Calendar Year	# of People Occupying Camp Site
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□ I am applying with another person, who will submit a separate application. Please only consider our applications together.

- □ I will have an additional person in my site who will not be applying for a Workamper position.
- \Box I am applying as a single.

Applicant Last Name:	First Name:
Additional Person Last Name:	First Name:
Will you have a pet with you? Yes No If yes, how many and	what type?
(Current rabies vaccination certificates are required; be sure to bring with	you)

PART 1: Contact Info

Primary Mailing Address	Alternate Mailing Address
Street:	Street:
City, ST, Zip:	City, ST, Zip:
Primary Phone #:	Primary Phone #:
Alternate Phone #:	Alternate Phone #:
Is this a mail forwarding address only?	Which month(s) of the year can mail reach you here?
If no, which month(s) can mail reach you here?	What's the best way to contact you?
	primary phone alternate phone e-mail
Primary E-Mail Address:	Secondary E-Mail Address:
Driver's License State/#	Driver's License Expiration Date

Are you retired?
Yes No Are you socking paid or uppaid positions?

Are you seeking paid or unpaid positions?	
How many hour/week are you seeking?	
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PART 2: Past Workamping and Employment Experience

Please list most recent experiences first. Please submit resume in addition to application if available.

Employer:	Position:	
Duties:		
Dates (from/to):	Supervisor	
Contact phone #:	Contact Email:	

Employer:	Position:	
Duties:		
Dates (from/to):	Supervisor	
Contact phone #:	Contact Email:	
Employer:	Position:	
Duties:		
Dates (from/to):	Supervisor	
Contact phone #:	Contact Email:	
Employer:	Position:	
Duties:		
Dates (from/to):	Supervisor	
Contact phone #:	Contact Email:	
Employer:	Position:	
Duties:		
Dates (from/to):	Supervisor	
	Contact Email:	

PART 3: Additional References

Please list two references, one personal and one professional, and include all requested contact information. In the right column indicate how long you have known each.

Reference Name	Address, City, ST, Zip Code	Phone #s	How long?
Personal:			
Professional:			

PART 4: Additional Questions

Do	you spea	ık, read,	or write any languages other than English that could be of benefit in your position?
	Yes 🛛	No	If yes, please list

Do you have any medical/physical conditions or limitations to be taken into consideration w	hen	assignii	ng ta	sks? NOT	E:
All Workcampers do need to be physically able to perform the duties of the jobs they accept	ot. Ho	owever,	dep	ending on	your
specific assignment, we may be able to modify the work to accommodate your needs.		Yes		No	-
If yes, please explain.					

By Colorado law and as a safety precaution for visitors and staff members, all Workcampers are subject to a criminal background check each year before assigned duties can begin. Upon hiring, we will request that you complete a separate authorization for criminal background check form.

If driving is a requirement of the position applied for, have you in the past 10 years been convicted of Driving Under the Influence ("DUI")?

Have you ever been investigated for child abuse or neglect? Have you ever been convicted of a felony or misdemeanor? □ Yes □ No □ Yes □ No □ Yes □ No **If you answered Yes to any of these 3 questions, please explain:** (Answering Yes to these questions does not constitute an automatic rejection for volunteer positions. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be taken into consideration).

Why is Workcamping appealing to you? _____

What special skill, interest, or experience do you have that you feel would most benefit the EVRPD Campgrounds?

Have you previously lived, worked, or volunteered in the Estes Valley area? If yes, please provide details.

Is there anything else you'd like us to know about you? _____

How did you learn about EVRPD's Workcamper Program?

PART 5: Your RV and Shirt Size

The Estes Park Campground Workamper sites can accommodate most sizes and types of RVs. However, we reserve the right to place you in a different site than planned.

Year/Make/Model of RV:					
Motorhome Sth Wheel Trailer	Conversion Van Other:				
Length of your RV: feet Slide-Outs? D Yes	□ No				
Is there an extra or tow vehicle or truck?					
Any additional trailers or items that would require storage space? Please list					
Electricity Needed: 50 amps 30 amps					
Shirt Fit and Size (for uniforms)					
🗆 Small 🗆 Medium 🗆 Large	□ XLarge □ 2XL □ 3XL				

Please read the statements below, fill in your name, then sign and date the application. By signing this application you are acknowledging your understanding of the EVRPD policies and that they apply to both employees and Workampers.

AFFIDAVIT, CONSENT AND RELEASE

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature:_____

Date: _____

Thank you for your interest in the hosting opportunities at the Estes Park Campgrounds. Please send completed application along with recent photos of yourself, your RV, and pet(s) to:

Zenda Smith, Campgrounds Manager zenda@evrpd.com

or mail to: Estes Valley Recreation and Park District Attn: Campgrounds Manager P.O. Box 1379 Estes Park, CO 80517

Questions? Please contact:

Zenda Smith, Campgrounds Manager Phone: (970) 342-5723