



Rainbow Glacier Adventures

“Connecting our guests with Alaska through our high-quality team.”

PO Box 1103, Haines, AK 99827
(907)766-3586 - Fax: (907)766-3580
www.tourhaines.com

APPLICATION FOR EMPLOYMENT

Applicant's Name: _____ Date of Birth: _____

Address: _____

Phone: _____ Email: _____

Position(s) Applying For:

- | | |
|--------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Rafting Guide | <input type="checkbox"/> Naturalist Guide |
| <input type="checkbox"/> Photography Guide | <input type="checkbox"/> Booking Agent |
| <input type="checkbox"/> Haines | <input type="checkbox"/> Dock Representative |
| <input type="checkbox"/> Skagway | <input type="checkbox"/> Vehicle Washer |

Do you seek full-time or part-time work? full-time part-time

Are you available to work May through September? Yes No

If not, what dates are you available? From _____ to _____

List any particular days/dates/times you cannot work: _____

Referred By: _____

Education:

What is the highest level of education completed or number of years attended?

High School _____ Undergraduate _____ Masters _____ Other _____

What was/is your area of study? _____

Certifications Received: (please include dates of expirations)

First Aid _____ CPR _____

Wilderness First Responder _____ Swift Water Training _____

Commercial Drivers License _____

Other _____

Three most recent employers:

Applicant's Name: _____ Date of Birth: _____

1. Business: _____ Supervisor Name/Title: _____
Your position: _____
Business Phone: _____ May we contact this person? Yes No
Dates Employed: from _____ to _____
Ending Salary: \$ _____ per Month per Hour
Reason for leaving: _____

2. Business: _____ Supervisor Name/Title: _____
Your position: _____
Business Phone: _____ May we contact this person? Yes No
Dates Employed: from _____ to _____
Ending Salary: \$ _____ per Month per Hour
Reason for leaving: _____

3. Business: _____ Supervisor Name/Title: _____
Your position: _____
Business Phone: _____ May we contact this person? Yes No
Dates Employed: from _____ to _____
Ending Salary: \$ _____ per Month per Hour
Reason for leaving: _____

Personal References:

1. Name: _____ Phone: _____
Address: _____
Position/Relation: _____
Years Acquainted: _____

2. Name: _____ Phone: _____
Address: _____
Position/Relation: _____
Years Acquainted: _____

3. Name: _____ Phone: _____
Address: _____
Position/Relation: _____
Years Acquainted: _____

Resume:

Please submit a current resume along with this application.

Signature: _____ Date: _____

This certifies that I completed this application, and that all entries on it and information on it are true and complete to the best of my knowledge.