

**La Foret Conference and Retreat Center  
Employment Application**

6145 Shoup Road  
Colorado Springs, CO 80908  
Office: (719) 495-2743 Fax: (719) 495-9016 Email: [mail@lafort.org](mailto:mail@lafort.org)  
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TO BE CONSIDERED FOR EMPLOYMENT APPLICATIONS NEED TO BE COMPLETED IN ENTIRETY

PLEASE PRINT

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

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

Address: \_\_\_\_\_

Business Telephone: (\_\_\_\_\_) \_\_\_\_\_ Home Telephone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**EMPLOYMENT DESIRED**

Are you applying for: Regular full-time work \_\_\_\_\_ Regular part-time work \_\_\_\_\_ Seasonal work \_\_\_\_\_

If applying for seasonal work, during what period of time are you available?

From \_\_\_\_\_ To \_\_\_\_\_

What days and hours are you available for work? \_\_\_\_\_

Are you available to work weekends? \_\_\_\_\_ Overtime, if necessary? \_\_\_\_\_

Are you willing to live on site, if necessary? \_\_\_\_\_ (Housing, if provided, is at the convenience of the employer)

Position applying for: \_\_\_\_\_

**PERSONAL INFORMATION**

Have you applied to or worked for La Foret before? \_\_\_\_\_ Dates \_\_\_\_\_

Why are you applying to work at La Foret? \_\_\_\_\_

If hired, would you have a reliable means of transportation to and from work? Yes \_\_\_\_\_ No \_\_\_\_\_

If under 16, can you submit a work permit? Yes \_\_\_\_\_ No \_\_\_\_\_

If hired, can you provide evidence of US citizenship or proof of legal right to live and work in this country?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, describe the functions that cannot be preformed \_\_\_\_\_

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicant/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility test.)

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state nature of the crime(s), when and where convicted and disposition of the case(s): \_\_\_\_\_

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(Note: No applicant will be denied employment on the ground of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

**EDUCATION, TRAINING AND EXPERIENCE**

School	Name and Address	No. of years completed	Did you graduate?	Degree or Diploma
High School				
College/University				
Vocational/Business/Military				
Health Care				
Camp/Retreat				

Do you have any other experience, training, qualifications or skill that you feel make you especially suited for work at La Foret Conference and Retreat Center? If so, please explain: \_\_\_\_\_

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List any machines or equipment for which you are qualified and experienced at operating: \_\_\_\_\_

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List any certifications or licenses (with numbers) that you hold: \_\_\_\_\_

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**EMPLOYMENT HISTORY**

**List below all present and past employment starting with *your most recent employer*. Account for all periods of unemployment. You must complete this section even if attaching a resume.**

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Telephone No. (\_\_\_\_\_) \_\_\_\_\_ Name and Title of Supervisor: \_\_\_\_\_

Your Position and Duties: \_\_\_\_\_

Date of Employment from: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Was employment full time: \_\_\_\_\_ part-time: \_\_\_\_\_ May we contact? \_\_\_\_\_

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Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Telephone No. (\_\_\_\_\_) \_\_\_\_\_ Name and Title of Supervisor: \_\_\_\_\_

Your Position and Duties: \_\_\_\_\_

Date of Employment from: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Was employment full time: \_\_\_\_\_ part-time: \_\_\_\_\_ May we contact? \_\_\_\_\_

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Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Telephone No. (\_\_\_\_\_) \_\_\_\_\_ Name and Title of Supervisor: \_\_\_\_\_

Your Position and Duties: \_\_\_\_\_

Date of Employment from: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Was employment full time: \_\_\_\_\_ part-time: \_\_\_\_\_ May we contact? \_\_\_\_\_

## REFERENCES

Please note: As a Child Care Licensed facility, we are required to contact a minimum of 3 references. Please provide accurate contact information so as not to delay the hiring process.

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Number of years acquainted: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Number of years acquainted: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Number of years acquainted: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Number of years acquainted: \_\_\_\_\_

**PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW**  
**APPLICANT'S CERTIFICATION, AUTHORIZATION AND RELEASE**

\_\_\_\_\_ La Foret is an equal opportunity employer and selects the best matched individual for the job based upon job related qualifications, regardless of race, color creed, religion, sexual orientation and gender, national origin, age, handicap or other protected groups under state, federal or local Equal Opportunity laws.

\_\_\_\_\_ I certify that I have not withheld any information requested of me and that the answers given by me are true and correct and complete to the best of my knowledge.

\_\_\_\_\_ I certify that I have personally completed this application.

\_\_\_\_\_ I understand and agree that any omission or misstatement on this application or on any document used to obtain employment with La Foret shall, at any time, be grounds for rejection of this application or for my immediate discharge if I am employed at La Foret.

\_\_\_\_\_ I understand that any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in Section 18-8-503, C.R.S., and upon conviction thereof, shall be punished accordingly.

\_\_\_\_\_ I understand and agree that overtime work may be required of me.

\_\_\_\_\_ I authorize La Foret to investigate all job-related matters including but not limited to my immigration status, educational background, references, prior work record, drivers record, and, if applicable, any criminal record I might have.

\_\_\_\_\_ I authorize La Foret to submit my fingerprints for investigation and to use the information derived from them, whether as part of the application process or as a condition of my continued employment at La Foret.

\_\_\_\_\_ I authorize all persons whom I have listed as references, and all persons that La Foret might contact about my employment at La Foret, to speak candidly about any matter that might, in their judgment, have any possible bearing on my suitability for employment at La Foret. I further authorize them to provide La Foret with any and all letters, reports and other information that might relate to the question of suitability for employment at La Foret, without giving me prior notice of any such disclosure.

\_\_\_\_\_ I release and waive any and all claims I have or may have against La Foret and its directors, officers, employees, and agents, and any and all person and/or entities who/which provide information in the course of any inquiry made by La Foret in conjunction with my employment there.

\_\_\_\_\_ I understand and agree that, in the absence of an express written statement to the contrary signed by an authorized representative of La Foret there is no employment contract between La Foret, and me and that nothing contained in my application, or conveyed during a job interview, or that may occur during my possible employment at La Foret is or shall constitute evidence of employment contract between me and La Foret.

\_\_\_\_\_ I understand and agree that, in the absence of a written employment contract with express statements to the contrary, if I am employed by La Foret, my employment is "at will", for no definite or determinable period and may be terminated by me or La Foret at any time with or without prior notice, and with or without cause, at my option or at the option of La Foret.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_