

Please complete the entire application

EMPLOYER

Employer	Crested Butte Development Team						
Home Address	Street	PO Box 1416					
	Apt/Unit	-					
	City	Crested Butte				81224	
Address	PO Box 1416						
City/State/Zip	Crested But	tte, Colorado 8	31224				
Telephone	(970) 596 4085						
Email	operations@crestedbuttedevo.com						
Our Mission	To provide a fun and safe environment for young cyclists to develop skills and passion that last a lifetime. The Crested Butte Development Team is a 501(c)(3) non-profit organization that was created to give the youth of our community a fun and safe outlet to explore the amazing mountains of the Gunnison Valley by mountain bike. Our main focus is to create lasting memories and provide each rider with not only superior bike handling skills but, more importantly, life skills that they will carry into their adulthood. We strive to instill a respect for self, our teammates and our community while practicing our very best trail etiquette.						
Equal Employment Opportunity Policy	It is the policy of Crested Butte Development Team, Inc. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.						



Crested Butte Development Team

Employment Application

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APPLICANT DETAILS

Full Name	First Name										
	Middle Name										
	Last Name										
	Preferred										
	Name										
Home Address	Street										
	Apt/Unit										
	City		State			ZIP Code					
Tolonhono	Phone										
Telephone											
0 110 11	Mobile										
Social Security Number											
Driver's License	State			Num	ber						
Emergency	Contact Name			1							
Contact	Phone										
	Mobile										
Job Position											
Applied For											
Have you ever	Yes			No							
been convicted of a felony or	If Yes, I was conv	ricted of									
misdemeanor?	on (date)										
	in (city, state) THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.										
							3AR				
Applicant's	Skill	VI OIVEESSIKEE)		ears of	I		ll Rat	ina	
Skills	Ortice					perience			lect o	_	
Check those							1	2	3	4	5
skills that you	Child Developm	ent									
have. List any other skills that	Mountain Biking										
may be useful	Coaching								ļ		
for the job you	Medical and/or					{					
are seeking. (For Skill Rating, 1 =	Outdoor Leaders					{			ļ		
poor ability; 5 =	Other Skills (list)				L		·	J	L	L	L
exceptional											
ability)											



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Applicant Employment History	Employer 1 Name								
	Supervisor Name								
	Address	Street							
		City			Sta	ate		ZIP Code	
	Job Duties								
	Reason for Leaving								
	Dates of Employment	Start Date				End	l Date		
	Employer 2 Name								
	Supervisor Name								
	Address	Street							
		City			Sta	ate		ZIP Code	
	Job Duties								
	Reason for Leaving								
	Dates of Employment	Start Date	Э			End	l Date		
	Employer 3 Name								
	Supervisor Name								
	Address	Street							
		City			Sta	ate		ZIP Code	
	Job Duties								
	Reason for Leaving					.,			
	Dates of Employment	Start Date	9		-	End	l Date		



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Applicant's	College/ University	Name					
Education and Training		Address					
		Did you receive a degree?	Yes		No		
			If yes, degree(s) received (list)				
	High School/ GED	Name					
		Address					
		Did you	Yes		No		
		receive a	If yes, degre	ee(s) received (lis	st)		
		degree?					
	Other Training						
	(graduate, technical,						
	vocational)						
	Current						
	professional						
	licenses or certifications						
	you hold						
	Awards,						
	Honors, Special						
	Achievements						
References	Reference 1						
List any 2 non-	Name						
relatives who	Address	Street					
would be willing to provide a		City		State	ZIP code		
reference for you.	Telephone						
	Relationship						
	Reference 2 Name						
	Address	Street					
		City		State	ZIP Code		
	Telephone						
	Relationship						



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Other Information Provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer.	
APPLICANT C	
	formation provided on this application is truthful and accurate. I understand that providing information will be the basis for rejection of my application, or if employment commences, tion.
regarding my emp fully and freely co	Butte Development Team, Inc. to contact former employers and educational organizations loyment and education. I authorize my former employers and educational organizations to immunicate information regarding my previous employment, attendance, and grades. I rsons designated as references to fully and freely communicate information regarding my ent and education.
I HAVE CAREFULL	Y READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.
APPLICANT SIGN	ATURE DATE