Please Fill Out Form Completely Application Date: APPLICANTS MAYBE TESTED FOR ILLEGAL DRUGS

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Date Received: _ Dated Called: _ Interview Date: _





TANABoat & Equipment Rentals | Lodging Fly Fishing Specialists | Guided Trips

Employmen	t Application		
Full Name:	Nickname:		
	Date of Birth:		
-	State: Zip:		
	Phone: Home Cell Work		
	FaceBook: Yes No Twitter: Yes No		
Position Applying For:	Location:		
Type of Employment: Full-time (25 hours +) Part-time (25 hours or less)			
Date Available to Start: until (End Date-for Seasonal Employment):		
Have you ever been convicted of a felony? ☐ No ☐ Yes If YES, please explain_			
May we contact your current employer? Yes No If NO, please explain			
Do you consent to a pre-employment and/or random qualified controlled	d substance and alcohol screening test? \square Yes \square No		
Are you able to commute to work up to 45 miles in one direction? \square Yes	No If NO, please explain		
Do you have a Good Driving Record? Yes No If NO, please explain			
Do you know how to Back Up a Trailer? Yes No	Have you Driven a Vehicle Towing a Trailer/Boat? $\ \square$ Yes $\ \square$ No		
Do you know how to Drive a Manual Transmission? \square Yes \square No	Do you know how to Row a Drift Boat/Raft? 🔲 Yes 🗌 No		
Do you know how to Tie Flies?	Do you know how to Build Rods? ☐ Yes ☐ No		
Fly Fishing Experience (List your experience, when you started, who go	ot you started, places you've fished, etc. You may attach another sheet if needed.):		
Do you have knowledge of local waters? Yes No (list bodies of water)):		
Do you have knowledge of local hatches and flies? Yes No (list your	experience):		

Former Employer Information: Please list all your employ	yers for the last three years starting with most recent		
Employer:	Supervisor:		
Location:	Phone:		
Position(s) Held:	Rate of Pay:		
Primary Duties:			
Reason for Leaving:			
	End		
Employer:	Supervisor:		
	Phone:		
Position(s) Held:	Rate of Pay:		
Primary Duties:			
	End		
Employer:	Supervisor:		
	Phone:		
	Rate of Pay:		
Reason for Leaving:			
	End		
Education: Please list your education and training experience			
	Graduation Date:		
	Major: Graduation Date:		
Other:			
Other Skills or Experience: Please list any other skills or ex	perience not listed above.		
Personal Reference (Must Provide): DO NOT include rela	atives or previous employers		
Name:	Occupation:		
City/State:	Phone:		
Name:	Occupation:		
City/State:	Phone:		
Name:	Occupation:		
City/State:	Phone:		
	olication form. I understand that, if I am hired, any misrepresentation or omission of facts by c. permission to contact any or all schools, previous employers (unless otherwise indicated), and such contract.		
	lcohol testing policy. Consent to and compliance with this policy is a pre-condition ossCurrents, Inc. is "at will," meaning it can be terminated for any reason and at any		
Signature of Applicant:	Date:		