

To be considered for employment, please complete both pages of this document and mail, e-mail, fax or drop off in person (documents can be signed at interview):

American Outdoor Products, Inc.
6350 Gunpark Drive
Boulder, CO 80301
303-581-9288 FAX
info@backpackerspantry.com

Employment Application (please print clearly)

Date _____

Name: _____ SS#: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Driver's License Number: _____ State: _____

Are you either a US Citizen or an Alien authorized to work in the United States? Yes _____ No _____

Employment Desired

Position _____ Date you can start _____ Salary Desired _____

Are you employed now _____ If so may we inquire of your present employer? _____

Ever applied to this company before? _____ Where? _____ When _____

Referred by _____

Education/Qualifications:

Education	Name and Location of School	NUMBER YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIES
GRAMM SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESP. SCHOOL.				

General

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK _____

SPECIAL SKILLS _____

ACTIVITIES: (CIVIC, ATHLETIC, ETC.) _____

US MILITARY OR NANAL SERVICE _____ RANK _____ PRESENT MEMBERSHIP IN NATIONL GURD OR RESERVES _____

Former Employers (LIST BELOW LAST THREE EMPLOYERS STARTING WITH LAST ONE FIRST)

DATA/MONTH/YAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM TO				
FROM TO				
FROM TO				
FROM TO				

WHICH OF THESE JOBS DID YOU LIKE BEST? _____

WHAT DID YOU LIKE MOST ABOUT THIS JOB? _____

References: PROVIDE THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1			
2			
3			

Applicant Signature _____ **Date** _____

IN CASE OF EMERGENCY NOTIFY: NAME _____

ADDRESS _____ PHONE _____

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDESTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HERE AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINET INFORMATION THEY MAY HAVE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE, THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATEED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

DATE _____ SIGNATURE _____