

Office Use Only Rec'd Date: \_\_\_\_\_ Training Date: \_\_\_\_\_ Volunteer Day: \_\_\_\_\_ AM/PM

FORMS: [ ] Liability Release [ ] Emergency Med Treat [ ] Confidentiality [ ] Photo/Video OK



## EMPLOYEE APPLICATION

To ensure that all employees are a good match for Silver Lining, our application is quite lengthy. Please complete all pages, and sign all forms before submitting. Thank you.

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Must be at least 18 years of age to be employed by Silver Lining.

Emergency Contact \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship \_\_\_\_\_

Have you ever been convicted of a crime?  Yes  No  
If yes, please explain the nature of the crime, date of the conviction and disposition. Conviction of a crime is not an automatic disqualification for volunteer work.

	PHONE NUMBER	BEST TIME TO CALL	Ok to TEXT?
Home			
Mobile			
Work			

How many days per week would you like to work?

1 – 2     3 – 4     5 or more

Please mark the days and times you are available with a P (Prefer Day) or A (Available).

	Morning 7:00–11:00 AM	Mid-Day 11:00 AM–4:00PM	Evening 4:00-7:00PM
Mon			
Tues			
Wed			
Thu			
Fri			
Sat			
Sun			

We will try to schedule you on your preferred days, but this is not always possible.

Rec'd Date: \_\_\_\_\_

Applicant Name \_\_\_\_\_

### Please tell us about yourself:

Are you a student? ?  Yes  No  
 If Yes: Full-Time [ ] Part-Time [ ]  
 School \_\_\_\_\_ Grade: \_\_\_\_\_

Are you a Military Veteran?  Yes  No  
 If Yes: Which branch? \_\_\_\_\_

Are you currently employed?  Yes  No  
 If Yes: Full-Time [ ] Part-Time [ ]  
 Employer: \_\_\_\_\_  
 Position: \_\_\_\_\_

**Horse Experience**  
 Do you have experience riding horses?  Yes  No  
 If yes:  English  Western

How long have you been riding horses? \_\_\_\_\_

Have you ever owned a horse?  Yes  No  
 If yes,  Currently Own  Boarded: \_\_\_\_\_  
 Previously Owned

Any professional horse discipline training?  
 \_\_\_\_\_

Other Experience: \_\_\_\_\_  
 \_\_\_\_\_

**Special Training & Talents**  
**Are you a Certified Instructor?**  Yes  No  
 If so, by PATH Intl?  Yes  No  
 By CHA?  Yes  No  
 Other? \_\_\_\_\_

Where did you get your certification? \_\_\_\_\_  
 \_\_\_\_\_

Do you know American Sign Language?  Yes  No  
 Do you speak other languages?  Yes  No  
 If yes which? \_\_\_\_\_

Special training, skills or hobbies:

Do you belong to other groups, clubs or organizations?

### REFERENCES:

Please list three people who know you well and can attest to your character, skills and dependability. Include your current or last employer, or last volunteering commitment. Because we are committed to providing a safe environment, and we serve children and other vulnerable populations, we verify all information, including references, on this application.

Person/Organization	Relationship to You	Contact Numbers	Length of Relationship
1.			
2.			
3.			

**Physical Commitment**

Do you have any physical limitations or medical conditions that we should be aware of?  Yes  No

If yes, please explain: \_\_\_\_\_

Have you had a tetanus shot within the last 10 years?  Yes  No      Date of last shot? \_\_\_\_\_

Can you pick up and carry at least 50 pounds for 30 feet?  Yes  No

Can you walk and job briskly for at least 30 minutes?  Yes  No

Are you comfortable jobbing beside a horse?  Yes  No

If you answered No to any of the above questions, please consider volunteering with Silver Lining Riding Program.

**SLR Camps:**

Silver Lining offers summer Camps in June with the potential to expand through July. Would you be willing to work summer camps?  Yes  No  Maybe

Silver Lining also offers one Winter Camp over Christmas break. Would you be interested in working Winter Camp?  Yes  No  Maybe

What are you interested in helping with or would like more information about?

<input type="checkbox"/> Barn Management	<input type="checkbox"/> Special Olympics
<input type="checkbox"/> Arena /Riders	<input type="checkbox"/> Special Events
<input type="checkbox"/> Admin/Marketing	<input type="checkbox"/> Fundraising

Other ideas: \_\_\_\_\_

**Volunteering:**

Occasionally we need substitute volunteers, would you like to be on this list?  Yes  No

Are you available as a short-notice substitute?  Yes  No

If Yes, if called for an urgent situation, how long would it take you to get to Silver Lining? \_\_\_\_\_