



**Intimate Guided Journeys into Self Discovery**

# Application for Employment

*Soltreks maintains a drug, alcohol, and smoke-free work environment. Soltreks is an equal opportunity employer and therefore does not discriminate on the basis of race, color, religion, sex, national origin, age, disability or any other characteristic protected by law in making employment decisions or providing services.*

## **Personal Information**

Last Name	First	Middle	SS# / /
Address			
City		State	Zip Code
Telephone Number		Email	
<i>Are you at least 21 years old? (please check) <input type="checkbox"/> YES or <input type="checkbox"/> NO If not, please indicate your age:</i> (Proof of age and work permits may be required prior to hiring.)			
<i>Do you have the legal right to work and be employed in the United States? <input type="checkbox"/> YES or <input type="checkbox"/> NO</i> (Proof of identity and legal authority to work in the U.S.A. is a condition of employment.)			
<i>Do you have a reliable means of transportation to and from work? <input type="checkbox"/> YES or <input type="checkbox"/> NO</i>			
<i>Have you ever been convicted of a crime other than a minor traffic violation? <input type="checkbox"/> YES or <input type="checkbox"/> NO</i> If yes, please explain and state the charge, the court, the date and the disposition of the case:			
<hr/>			
<i>Are you a former student of Soltreks or another wilderness treatment program? <input type="checkbox"/> YES or <input type="checkbox"/> NO If so, please list the date(s), the facility, and a brief description of your experience:</i>			

## **Position Desired**

<input type="checkbox"/> Wilderness Field Instructor ( <input type="checkbox"/> Level I <input type="checkbox"/> Level II <input type="checkbox"/> Level III <input type="checkbox"/> Apprentice )			
<input type="checkbox"/> Internship	<input type="checkbox"/> Admissions	<input type="checkbox"/> Administrative Assistant	<input type="checkbox"/> Clinical
<input type="checkbox"/> Wilderness Program Coordinator		<input type="checkbox"/> Logistics Coordinator	
<input type="checkbox"/> Support		<input type="checkbox"/> Other _____	

<b>Date available to start:</b>	<b>Full Time, Seasonal, or Contract:</b>
How did you hear of this position?	
What interests you about the possibility of working with Soltreks, Inc.?	
How have you pursued and currently support your personal growth work?	

## **Education**

	Name of School and Location	Graduated (Year)	Number of Years	Degree / Course or Major	Average GPA
High School		<input type="checkbox"/> NA			
College		<input type="checkbox"/> NA			
Graduate School		<input type="checkbox"/> NA			
		<input type="checkbox"/> NA			
Credentials / Licenses		Type(s):		Expiration Date(s):	
Please list honors, awards, special skills, additional education or training:					

**Do you currently possess any of the following?**

<b>CPR certification</b> <input type="checkbox"/> YES (Exp. Date _____) <input type="checkbox"/> NO	<b>1<sup>st</sup> Aid certification</b> <input type="checkbox"/> YES (Exp. Date _____) <input type="checkbox"/> NO
<b>WFR/EMT certification</b> <input type="checkbox"/> YES (Exp. Date _____) <input type="checkbox"/> NO	<b>CPI certification</b> <input type="checkbox"/> YES (Exp. Date _____) <input type="checkbox"/> NO
<b>A valid driver's license</b> <input type="checkbox"/> YES (Exp. Date _____) <input type="checkbox"/> NO	<b>State</b> _____ <b>DL #</b> _____

## **Employment History**

<b>Current Employer</b>	Address/State/Zip	Telephone
Dates of Employment (Month/Yr) From: _____ To: _____		Position(s) Held
Supervisor's Name & Title		May we contact this Employer? <input type="checkbox"/> YES or <input type="checkbox"/> NO
Salary Start: _____ Ending: _____		Reason for Leaving
Please describe significant responsibilities:		

<b>Employer #2</b>		Address/State/Zip	Telephone
Dates of Employment (Month/Yr) From: _____ To: _____		Position(s) Held	
Supervisor's Name/Title		May we contact this Employer? <input type="checkbox"/> YES or <input type="checkbox"/> NO	
Salary Start: _____ Ending: _____		Reason for Leaving	
Please describe significant responsibilities:			

<b>Employer #3</b>		Address/State/Zip	Telephone
Dates of Employment (Month/Yr) From: _____ To: _____		Position(s) Held	
Supervisor's Name/Title		May we contact this Employer? <input type="checkbox"/> YES or <input type="checkbox"/> NO	
Salary Start: _____ Ending: _____		Reason for Leaving	
Please describe significant responsibilities:			

<b>Employer #4</b>		Address/State/Zip	Telephone
Dates of Employment (Month/Yr) From: _____ To: _____		Position(s) Held	
Supervisor's Name/Title		May we contact this Employer? <input type="checkbox"/> YES or <input type="checkbox"/> NO	
Salary Start: _____ Ending: _____		Reason for Leaving	
Please describe significant responsibilities:			

## Military History

Military Service Status		
<input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> National Guard <input type="checkbox"/> Reserves <input type="checkbox"/> Advanced ROTC <input type="checkbox"/> N/A (No military service)		
Branch of Service	Dates of Service	Are you currently? <input type="checkbox"/> Active <input type="checkbox"/> Inactive
List any specific schools attended or skills acquired during your military service:		

## Specific Related Experience for Field Positions

Please complete the following questions regarding your personal and professional outdoor experience using a separate piece of paper. Please type or legibly print your responses. A detailed professional outdoor resume will bring clarity to your descriptions.

1. How does applying for a position with Soltreks fit with your career objectives?
2. How many weeks or months do you anticipate working and what specific treks interest you the most?
3. Describe the most challenging course/trek that you've worked and what you learned from it.
4. Please detail your **professional history** with wilderness based outdoor and therapeutic programs specifying: Organization, Dates of Employment, and #of days in the field per trek and Position, Trek Type, Supervisor or Staff Director at the time. Feel free to cross reference your answers (e.g., mentioned in #4, see #2 in Employment History). Include specific responsibilities in jobs or on treks (i.e., logistics, curriculum, therapy) and enough description/examples to give us a good sense of your experience.
5. Please list significant **personal outdoor trips/expeditions** you have experienced, mentioning the location, year, # of field days, # of people in group, role in planning and facilitating the trip.
6. Please list your **technical skills/experience** in the following areas:
  - **Climbing:** rock climbing, mountaineering, ropes course and climbing wall—include the level at which you comfortably lead traditional routes, a list of some of the routes you've set-up, led or followed, peaks you've climbed, etc. Describe your role in these climbs and facilitation of ropes course/climbing walls.
  - **River/Lake Travel Experience:** canoeing, kayaking, oar & paddle rafting, river crossings—include what class of water you comfortably paddle/guide/row, the names of rivers/runs you've floated, difficulty of these runs, distance/number of days per trip, description of river crossings requiring management or technical skills, lake navigation and route finding, and your role in these trips.
  - **Winter Camping:** snow and mountain travel, shelters—include environmental conditions & hazards, location and elevation, and comfort level, and your role in these treks.
  - **Desert Travel:** shelters, on & off trail navigation—include elevation, route finding, hazard evaluations, weather conditions, scouting for water sources, river crossing techniques, and your role in these treks.
7. **Other experience:** Please describe any other experience you have that is relevant to your success as a wilderness instructor. Please mention working with special or diverse populations, fishing, natural sciences, service learning projects, counseling skills, crisis intervention, initiatives, etc.
8. **Safety and Judgment:** Please give two examples of your experience with hazard evaluation and group assessment/ management. Identify what leadership role you were in and give at least one example from a situation in which you learned a lesson from a mistake you or the group made. We consistently assess our program delivery/decisions with the intent to learn from them.

## **Specific Related Experience for Therapist Positions**

Please complete the following questions regarding your clinical and therapy experience using a separate piece of paper. Please type or legibly print your responses. A detailed professional therapeutic resume will bring clarity to your descriptions.

1. What attracts you to seeking employment with Soltreks and how does it relate to your career objectives?
2. How long do you anticipate on working, and what obligations may limit your availability?
3. What specific problems and client groups are you experienced in working with?
4. What experience do you have working with parents? Families?
5. What experience do you have in wilderness therapy or outdoor behavioral health?
6. **Professional Organizations and Associations:** Please list any professional groups or organizations to which you belong.
7. **Group Education and Training:** Please list all group coursework or training you have completed (i.e. facilitation). List any certifications you have that apply specifically to group work.
8. **Group Experience**  
Please list all groups, and check the applicable boxes

GROUP NAME	DATES	TYPE-definitions below	FACILITATION	CLOCK HOURS
	From: [ ] To: [ ]	<input type="checkbox"/> Psychotherapy <input type="checkbox"/> Task/work <input type="checkbox"/> Guidance/psychoed. <input type="checkbox"/> Counseling	<input type="checkbox"/> Solo  <input type="checkbox"/> Co-leader	<input type="checkbox"/> < 45 <input type="checkbox"/> 45-60 <input type="checkbox"/> 60+
	From: [ ] To: [ ]	<input type="checkbox"/> Psychotherapy <input type="checkbox"/> Task/work <input type="checkbox"/> Guidance/psychoed. <input type="checkbox"/> Counseling	<input type="checkbox"/> Solo  <input type="checkbox"/> Co-leader	<input type="checkbox"/> < 45 <input type="checkbox"/> 45-60 <input type="checkbox"/> 60+
	From: [ ] To: [ ]	<input type="checkbox"/> Psychotherapy <input type="checkbox"/> Task/work <input type="checkbox"/> Guidance/psychoed. <input type="checkbox"/> Counseling	<input type="checkbox"/> Solo  <input type="checkbox"/> Co-leader	<input type="checkbox"/> < 45 <input type="checkbox"/> 45-60 <input type="checkbox"/> 60+

### **Group Definitions**

Psychotherapy/Personality Reconstruction	Task/Work	Guidance/Psychoeducation	Counseling/Interpersonal Problem Solving
Helping group members to remediate their in-depth psychological problems; depth and extent of psychological disturbance is significant; goal is to aid each individual to reconstruct major personality dimensions.	Assisting to correct or develop functioning of groups; focus is application of group dynamics, principles and processes to improve practice and the accomplishment of identified work goals.	Educating group participants who are presently unaffected about a potential threat, a developmental life event (e.g. transition point), or how to cope with an immediate life crisis with the goal of preventing an array of educational and psychological disturbance from occurring.	Helping to resolve the usual problems of living through interpersonal support and problem solving; additional goal is helping participants develop their existing interpersonal problem solving competencies so they may be better able to handle future similar problems; non-severe career, education, personal, social and development concerns are frequently addressed.

## **References**

Please list **3** professional references including **1** who was your immediate supervisor or who worked for you. Please do not include family members.

<b>1) Name</b>	<b>Address/City/State</b>	<b>Telephone</b>
<b>Company</b>	<b>Position</b>	<b>Relationship</b>
<b>2) Name</b>	<b>Address/City/State</b>	<b>Telephone</b>
<b>Company</b>	<b>Position</b>	<b>Relationship</b>
<b>3) Name</b>	<b>Address/City/State</b>	<b>Telephone</b>
<b>Company</b>	<b>Position</b>	<b>Relationship</b>

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*Please read the following statements carefully and indicate your understanding and acceptance by signing in the space provided.*

*I confirm* that all the information provided by me in this application for employment is true and complete to the best of my knowledge. I also authorize Soltreks to verify this information and release Soltreks from any liability in connection with any such verifications or attempts to verify.

*I understand* that employment may be conditioned upon the receipt of satisfactory responses to references, passing a Background Criminal Investigation, and satisfactory completion of a medical examination and drug screening. All employees must present documentation establishing their identity and eligibility to work in the United States.

*I authorize* any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, and any other information they might have with regard to any of the subjects covered by this application.

*I understand* any misstatement, falsification, or omission of information provided therein may be grounds for refusal to hire or, if hired, for termination of employment.

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

**Signature of Applicant:** \_\_\_\_\_

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**Fax to:** 707-549-3785 or **email to** [admin@soltreks.com](mailto:admin@soltreks.com)

**Mailing Address:**  
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218.834.4607