

Equal Opportunity Employer

Position(s) Desired: \_\_\_\_\_

### APPLICATION FOR EMPLOYMENT

Please note that applications for employment are only considered active for a period of three months. If you have not been employed at the end of three months from the date of this application, it will be necessary for you to file a new application form, if you still wish to be considered for employment.

#### PERSONAL DATA

Name \_\_\_\_\_ Any Other Name Used \_\_\_\_\_

Present Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Previous Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Are you at least 18 years of age? \_\_\_\_\_

Are you a citizen of the U.S. or are you otherwise lawfully authorized to work in this country? ( ) YES ( ) NO  
Every offer of employment is contingent upon the employee completing an employment verification form and showing original documents designated by law to prove identity and right to work.

Are you a former employee? \_\_\_\_\_ If YES, when were you employed here? \_\_\_\_\_

Have you applied for employment with us previously? \_\_\_\_\_ If YES, when \_\_\_\_\_

**Employees may be scheduled to work overtime, nights and/or weekends. If you are not available to work certain hours and/or days, please tell us what periods you are not available and the reason why you are not available. We may be able to accommodate your schedule:**

#### EDUCATIONAL DATA

Type of School	Name	Address	From	To	Did You Graduate?	Degree
High School			X	X		
College						
Other						

Please list any specific work skills you have and any type of machinery that you can operate, including office equipment: \_\_\_\_\_

List any occupational or professional licenses you hold \_\_\_\_\_

What prompted you to apply here? Paper \_\_\_\_\_ Friend \_\_\_\_\_ Employee \_\_\_\_\_ Other \_\_\_\_\_

Date that you are available to start work \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Temp \_\_\_\_\_

<b>WORK HISTORY</b> PAST EMPLOYMENT (List most recent employer first)	<b>DATES</b>	<b>WHAT DID YOU DO?</b>	<b>REASON FOR LEAVING</b>
Name of Employer:  Address:  Phone Number:  Supervisor:	From:  To:		
Name of Employer:  Address:  Phone Number:  Supervisor:	From:  To:		
Name of Employer:  Address:  Phone Number:  Supervisor:	From:  To:		

May we contact the employers listed above? \_\_\_\_\_ If not, please indicate which employers you do not wish us to contact \_\_\_\_\_

Have you ever been convicted of a crime or had adjudication withheld by a court or a military tribunal?

YES ( ) NO ( ) If YES, please describe \_\_\_\_\_  
**A record of a conviction or adjudication withheld will not necessarily be a bar to employment. Factors such as age and time of offense, seriousness and nature of the violation, and rehabilitation will be taken into account.**

Please list any information concerning your previous employment including experience and training not listed above that you feel is pertinent to your application \_\_\_\_\_

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS FORM.**

I certify that the answers given by me to the foregoing questions and statements are true and correct without falsifications, omissions, or misleading statements of any kind whatsoever. I agree that the company shall not be held liable in any respect if my employment is terminated because of the falsity of statements, inaccuracies or omissions made by me in this application, without regard to either my knowledge of the inaccuracy, omissions or falsity or the length of employment. I authorize previous employers, schools or persons named above to give any information regarding my employment, together with any information they may have regarding me, whether or not it is in their records. I hereby release all companies, schools or persons from all liability for any damage for issuing this information.

I understand that since the Hotel is in operation 24 hours a day, seven days a week, the following conditions may be mandatory: overtime, rotation of shifts, weekend work and holiday work. If accepted for employment, I agree to abide by the rules and policies of the Hotel. I understand and agree that I am free to terminate my employment at any time with or without cause and with or without notice. I further understand and agree that the Hotel has the same rights as I do to terminate my employment and compensation at any time, with or without notice and with or without cause. I understand that this application does not constitute a contract or an offer to make a contract. I understand that no representative of the Hotel has any authority to enter into any agreement with me for employment for any specified period of time; or to make any agreement contrary to the rules and policies of the Hotel.

Date \_\_\_\_\_ Signature \_\_\_\_\_