

Application for Employment

Wonder View Inn

This Employer is an equal opportunity employer. We consider applicants without regard to race, color, sex, sexual orientation, physical or mental disability, religion, age, ancestry, national origin, veteran status, or any other legally protected status.

Last Name	First	Middle	Today's date
Street Address			Home Telephone
City	State	Zip	Work Telephone
Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when			Social Security Number
Job you are applying for			Pay Expected
If hired, how soon could you begin?			Shift Preferred
Will you work <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Weekends			Do you smoke?
How did you hear about our company?			
Do you have a disability that prevents you from performing the essential functions of the job for which you are applying, with or without reasonable accommodation? Explain			
If hired, can you submit verification of your legal right to work in the United States?			

EDUCATION

	Name of School	Years Completed	Did You Graduate?	Course of Study
College				
High School				
Elementary				
Other				

Have you ever served in the US Military? <input type="checkbox"/> Yes <input type="checkbox"/> No Branch _____ How long _____ Special duties or training received
Activities: (Hobbies, Civic, Athletic, Volunteer work, Etc.)
List any skills that you feel would help you in your job.

WORK EXPERIENCE

Please list your last four jobs, starting with your present or most recent. Please do not leave out any of your last four jobs.

Employer	Dates Employed From _____ To _____
Address	Starting pay rate
	Final pay rate
City _____ St. _____ Zip _____ Phone _____	Reason for leaving
Type of work / duties	Name of Supervisor

Employer	Dates Employed From _____ To _____
Address	Starting pay rate
	Final pay rate
City _____ St. _____ Zip _____ Phone _____	Reason for leaving
Type of work / duties	Name of Supervisor

Employer	Dates Employed From _____ To _____
Address	Starting pay rate
	Final pay rate
City _____ St. _____ Zip _____ Phone _____	Reason for leaving
Type of work / duties	Name of Supervisor

Employer	Dates Employed From _____ To _____
Address	Starting pay rate
	Final pay rate
City _____ St. _____ Zip _____ Phone _____	Reason for leaving
Type of work / duties	Name of Supervisor

Are you working now?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	May we contact your employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Reason					

Which of the above jobs did you like best?	Why?

Have you ever held a second job at the same time as you had a full-time job? Yes No Explain

Have you ever had a job while going to school full-time? Yes No Explain

Can you read and write at a sixth grade level? Yes No

What are you looking for in a job? (Be specific)

Describe your use of alcohol or illegal drugs.

What qualities, special skills or training do you possess that would be the most valuable to you in a job with our company?

Why would you stay at this job for three or four years?

Why are you the best person for this job?

What are your long-term career goals?

List any other information you would like us to consider or use this space to sell yourself.

REFERENCES

List the name and telephone number of three people who know you but are not related to you.

Name	Telephone	Relationship

Driver's License Number _____ State _____ Expiration date _____

Has your license ever been revoked or suspended? Yes No If yes, why? _____

Have you ever been arrested or convicted of a crime, or pled guilty, NOLO, or no contest? Answering "Yes" to this question will not necessarily disqualify an applicant from employment.

Yes No Charge _____ Sentence _____

If yes, please list approximate date, nature of offense, location, status, and penalty. _____

Is there a criminal action currently pending against you? Answering "Yes" to this question will not necessarily disqualify an applicant from employment.

Yes No If yes, please list approximate date, nature of offense, location, status, and penalty. _____

Have you ever been terminated from a job or resigned from a job as an alternative to termination? Yes No Explain _____

Have you ever been disciplined or warned by an employer for excessive absenteeism, lateness, or poor job performance? Yes No

Explain _____

Do you have any relatives working for our company?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name
Have you ever worked at a hotel?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name and Location

Spouse's name _____ Occupation _____

Parents' name _____ Occupation _____

Applicant Certification

I certify that I have provided truthful and complete responses to all inquiries in my application and on any resume I may have provided. Should I be employed by this Employer, I understand that any misrepresentation, falsification, or omission may result in immediate dismissal.

I authorize this Employer to contact any or all of my current and prior employers, schools, references, and any other person and authorize them to provide all information requested of them, personal or otherwise. I release any entity which provides information to this Employer from liability for any damage or injury that may result from furnishing such information to this Employer. I authorize this Employer to verify all information set forth in my application and received during the application process by any and all other means authorized or permitted by law, including but not limited to criminal checks and driver's license checks.

I understand that any employment is on an at-will basis. I understand that if I accept employment I may terminate employment at any time and may be terminated at any time, with or without cause, and that I have no express or implied contract for continued employment.

I understand that an offer of employment may be conditioned on the results of a medical examination.

This hotel is open seasonally 7 days a week, 24 hours a day, and I understand that I may be asked to work at any time.

Applicant Signature _____ Date _____