APPLICATION FOR EMPLOYMENT

Name of Hotel		Date of Application				
Position Applying for:	Salary Desired					
How did you learn about us?	Advertisement	Friend	Relative	Walk-In	Other	
Name						
Last		First		Middle		
Address						
Number	Street	City	Stat		Zip	
Phone ()	Other Phone ()		Social Securi	ity No		
Are you legally authorized to wo	rk in the United States	s? Yes	No (You must s	how proof.)		
Are you at least 18 years old?	_ Yes No If NO), how old are y	you?			
Have you worked or applied at the						
If yes, when & what position?						
List name, position and relationsl	hip of any relative eve	r employed at t	his Hotel:			
What shift (s) are you available?	_1 st 2 nd 3 rd _	_Any Ho	ow soon can you	start?		
What days/nights are you availab		-	_			
Are you willing to work Sat & Su						Nο
The journming to work and a z.	You may be given differ			iou sonousit.		,1 10
What would you say your compu	uter skills are? Not	ne Basic	Advanced			
Have you worked in a Windows						
The you worked in a 1, mac						
Circle Highest Grade 1 2 3		Education 0 11 12	College 1	2 3 4		
Degree/License Held						
Name of Last School		C	ity		State	
Other Schools		C	Lity		State	
	T 1	1 11: 4				
List your posi	tions of the past 5 years, list most	loyment Histor at recent employer first,	ry , use additional sheet if n	eeded.	Emp	ploymen Verified
1) Company			From_	То)	
Address						
Supervisor			Position			
Salary	Reason for le	eaving				
Description of Work						
2) Company			From_	То)	
Address			P	hone		<u></u>
Supervisor			Position			
Salary	Reason for le	eaving				
Description of Work						

3) Company	From To
Address	Phone
Supervisor	Position
Salary	Reason for leaving
Description of Work	
	inated, laid off, discharged or asked to resign from any employment? Yes No (s) and reason(s) for each discharge/resignation
	Applicant's Statement is very important that you read and understand this section before you sign it. have any questions, please ask. By signing, we will assume that you fully understand and agree.
certify that the facts contained in	his application are true and complete to the best of my knowledge. I understand that if I am employed, any naterial omission by me on this application will be sufficient cause for immediate discharge from the employer's service,
color, sex, age, marital status, medion of the job as stated in the Employed Americans with Disabilities Act. If will notify the hotel within three (3) The hotel reserves the right to requ	practice of the hotel to hire, train, promote, compensate, and administer all employment practices without regard to race, al condition, religion, veteran status, national origin, or disability unrelated to the ability to perform the essential function Handbook under Job Requirements. Furthermore, I understand that the hotel is committed to complying with the believe that I need a reasonable accommodation in order to apply for employment due to the fact that I have a disability days of my application of my specific needs for reasonable accommodation so the hotel can assist me where appropriate e from me documentation from an appropriate professional (e.g., a doctor, rehabilitation counselor etc.) confirming that functional limitations for which a reasonable accommodation is requested.
he information contained in this ap	act and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of oblication which may include a criminal background check. I hereby release from liability the employer and its g and using such information. I also hereby release from liability all other persons, corporations or organizations for
This application does not constitute of the employer has the authority to take of convenience or to facilitate	imployment shall be "at will." If I am hired, I understand that I am free to resign at any time, with or without prior notice. an agreement or contract for employment for any specified period or definite duration. I understand that no representative make any assurances to the contrary. Any salary figures provided to an employee in annual or monthly terms are stated from parison and are not intended and do not create an employment contract for any specific period of time. Additionally, to a 90-day evaluation period. Work schedules may vary and can be unpredictable. I may be required to work a different
esting during the course of my em	ul drug or alcohol testing that may be required as a condition of employment and understand that refusal to submit to sucloyment may result in disciplinary action, up to and including discharge. The use, possession, or being under the influence company time is prohibited and result in termination of employment.
	equal opportunity employer and that they consider applicants for positions without regard to race, color, religion, sex, isability, or any other protected classes as defined by federal, state, or local law.
regarding the affairs and business p	ed, then by virtue of my employment, I may acquire confidential information, including trade secrets and proprietary dat ans of the employer, all of which I agree to hold in trust and confidence during and following my employment. I agree t, I will return all employer property and written documents in my possession.
If I am not employed by the hotel a calling 386-255-2577.	d I disagree with the decision, I understand that I can file a reassessment of my application through the corporate office by
By signing below I represent and westrictive agreement.	rrant to the employer that I am not contractually obligated to another company by a non-competition or other type of
claim, whether statutory or at co discrimination. I understand that	ondition of my employment, I agree to waive my right to a trail by jury in any action or proceeding involving any amon law, related to or arising out of my employment or the termination of employment, including claims of I am waving my right to a jury trail voluntarily and knowingly and free from duress or coercion. I understand the terson of my choosing, including an attorney, before signing this document.

Date

Signature of Applicant