

Initials: ____ Date: ____

Moraine View Restaurant & Kayak Rental

EMPLOYMENT APPLICATION

Moraine View LLC, is an equal opportunity employer and complies with all applicable federal and state laws regarding nondiscrimination. Moraine View LLC is committed to a policy of equal opportunity for all persons and does not discriminate on the basis of race, color, national origin, age, marital status, sex, sexual orientation, gender identity, gender expression, disability, religion, height, weight, or any other type of discrimination.

Personal Information (Please complete all fields, write "N/A" on empty fields)										
Last Name:		First Name:		Middle Initial:	Ар	plication Date:				
Email:		Phone Number:		Cellular phone number:						
		, nene maniben	Cellular prior		ne number.					
Address:		Unit:	City:	State		Zip Code:				
Are you legally authorized to work in the US2 (C)	ircle one)	VES / NO / NA	Do you have a reliable method of trans	nortation to the job	location?	(Circle one) YES / NO				
Are you legally authorized to work in the US? (Circle one) Will you now or in the future require sponsorship for employment visa status? YES / NO / NA If you are under eighteen (18), are you able to obtain a work permit? YES / NO / NA			Have you ever been in the US Armed Forces? (Circle one) YES / NO							
Have you ever been convicted of any misdemean	nor or felony, including dr	iving convictions such	If yes, Branch: From: To: Rank at discharge: If you answered "YES" to being convicted of a misdemeanor or felony, please provide dates, places,							
as operating a vehicle while intoxicated, under the etc.? (Circle one)	•	YES / NO	charges and disposition (outcome) of all convictions, attach a separate page if needed:							
Note: A conviction does not automatically disqualify a job applicant from further consideration. Each application is evaluated individually, all decisions of employment will be made in										
compliance of the Fair Credit Reporting Act, 15 U	JSC § 1681.		Note: All positions may be subject to a background check where applicable by law.							
Work Information Have you previously worked for Moraine View LL'	C2 (Circle one) YES / I	NO.	Do you have Friends or Relatives work	ing for Moraine Vie	wIIC2 (Circle one) YES / NO				
If Yes, when:	Do you have Friends or Relatives working for Moraine View LLC? (Circle one) YES / NO If yes, list names:									
Position you are applying for (leave blank if unknown	own):		Location & Title (leave blank if unknown): Date			available to start:				
Shift Length	Seasonal Availability: Will your availability cha		Indicate all dates, days or hours you C /a a separate availability form):	ANNOT WORK durin	ig this year	(leave blank if submitting				
(Check all	to your enrollment in a school?									
Previous Employment (Start from most recent)										
Employer:	Title of Position:		From (MM/YY): To (M			M/YY):				
Supervisor Name:	Tolophono		Descen faul covings							
Supervisor Name:	Telephone: Reason for Leaving:									
Job Duties:	Can we contact this employer? ☐ YES ☐ NO									
					LL YE	S LINU				
Employer:	Title of Position:		From (MM/YY):		To (MM/YY):					
Supervisor Name:	Telephone:		Reason for Leaving:							
Job Duties:					Can w	ve contact this employer?				
					☐ YE	s 🗆 no				
Employer:	Employer: Title of Position:		From (MM/YY): To (N			MM/YY):				
Supervisor Name:	Telephone:		Reason for Leaving:							
Job Duties:				Can we contact this employer?						
						·- ··- -				
Employer:	Title of Position:		From (MM/YY): To (MI							
Supervisor Name:	Telephone:		Reason for Leaving:							
Job Duties:			I .			ve contact this employer?				



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Education										
Institution Name:		From (MM/YY):	To (MM/YY):		Major / Certification	Did you Graduate? YES / NO				
High School										
College										
Other										
Skills										
	Skills / Languages			Source of Tra	aining (if app	olicable)	Years of Experience:			
Professional	or Personal References									
Name:			Relationship:			Telephone:	Years Acquainted:			
certify that the answers on this document are true to the best of my knowledge. I realize that all information furnished is important and that Moraine View LLC will rely on such information in engaging me and in continuing my employment. I understand that Moraine View LLC may nvestigate the work and personal history I have disclosed and verify all data given on this Application for Employment, related submittals, and in interviews. This inquiry may include information as to my character, general reputation, ability, skills and personal characteristics, and consent to the conduct of this inquiry and to the consideration of any statements or references by former employers that are given in response to the inquiry. I authorize all individuals, schools and employers named, except as specifically limited on this application, to provide information requested about me, and I release them and Moraine View LLC from liability for damages in providing this information. I understand and acknowledge that any misrepresentation, omission or incorrect statement of fact can result in rejection of my application or, if hired, immediate discharge. I acknowledge and agree that no manager or representative of Moraine View LLC has any authority to enter not any employment agreement with defined terms or established promises. I understand and agree that, if I am employed I will be an atwill employee, and Moraine View LLC may terminate my employment at any time and for any or no reason with or without prior notice. Date:										
FOR MORAINE VIEW LLC MANAGEMENT USE ONLY										
Was applic	Was applicant interviewed? YES / NO If yes, Date: Interviewed by:									
Acceptable	e for Employment? YES / NO	yes, Position:			Start Date:					
Notes:										