



Application of Employment

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Please Print

Position(s) applied for: _____	Date of application ____/____/____
Name: _____	Social Security # _____
Last First Middle Int.	
Address: _____	
Street City State Zip Code	
Telephone #: () _____	Mobile/ Beeper/ Other Phone#: () _____
Email Address: _____	

Have you ever been employed here before? Yes No

If "Yes", please give dates and position(s) _____

If under the age of 18, and it is required, can you furnish a work permit? Yes No

If "No", please explain _____

Are you legally eligible for employment in this country? Yes No

(IF HIRED, PROOF OF CITIZENSHIP WILL BE REQUIRED WITHIN 3 DAYS OF START DATE)

Type of employment desired: Full-Time Part-Time Temporary/Seasonal Educational Co-Op

Date available for work ____/____/____ What is your desired salary range? \$ _____

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? Yes No

If "Yes", please provide date(s) and details _____

*Answering "YES" to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Driver's license number if driving is an essential job function _____ State _____

EMPLOYMENT HISTORY Shaner Hotel Group is an Equal Opportunity Employer

Previous Employer 1			
From: _____	To: _____	Employer: _____	Title/ Position: _____
Phone #: _____	Address: _____		Supervisor: _____
Wage/ Salary: \$ _____	Nature of Work: _____	Reason for Leaving: _____	
Previous Employer 2			
From: _____	To: _____	Employer: _____	Title/ Position: _____
Phone #: _____	Address: _____		Supervisor: _____
Wage/ Salary: \$ _____	Nature of Work: _____	Reason for Leaving: _____	
Previous Employer 3			
From: _____	To: _____	Employer: _____	Title/ Position: _____
Phone #: _____	Address: _____		Supervisor: _____

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Wage/ Salary: \$ _____	Nature of Work: _____	Reason for Leaving: _____
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Skills & Qualifications

Summarize any additional training & skills. Include licenses & certificates that relate to the functions of the position for which you are applying.

Educational Background

Name and Location	Years Completed	Did You Graduate?	Course of Study
HIGH SCHOOL			
COLLEGE			MAJOR/DEGREE
OTHER			

References (give the names of three persons not related to you, whom you have known for at least one year)

Name	Relationship	Telephone	# of Years Known
1.)			
2.)			
3.)			

EMERGENCY CONTACT(s) _____

TELEPHONE # _____ RELATIONSHIP _____

Applicant Statement

I hereby declare the information provided by me in this application is true and complete, and I understand that falsification of this information is grounds for refusal to hire or, if I've been hired, for termination.

I authorize any of the persons or organizations referenced in this application to give you and any of them all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from liability for any damage which may result from furnishing such information to you.

I further acknowledge that if the employer employs me, my employment will be "at-will", and may be terminated with or without cause at any time by me or by The Shaner Hotel Group.

I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to assure any benefits or terms and conditions of employment, either prior to commencement of the employment or after I have become employed.

I consent to a drug test, either prior to commencement of employment or after I have become employed, if deemed necessary by the employer.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.
I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____/____/____

* Colorado and Rhode Island property applicants need only answer if the convicted crime was violent in nature, dealt with illegal (controlled) substance(s), or related to stolen property in any manner.