

HDG Hotels Employment Application Form

PLEASE PRINT ALL INFORMATION REQUESTED

For Internal Use Only

APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

DATE _____

Name _____

Last
First
Middle
Maiden

Present address _____

Number
Street
City
State
Zip

Telephone (____) _____ Position applied for _____ Hourly rate desired _____

For which property _____ FULL-TIME PART-TIME

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

EMPLOYMENT

Work Experience Please list your work experience for the **past ten years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of Company Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final

Can we contact this company for reference? YES NO Your last job title _____

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Employment (Cont.)

Name of company Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
Can we contact this company for reference? <input type="checkbox"/> YES <input type="checkbox"/> NO		Your last job title	
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of company Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
Can we contact this company for reference? <input type="checkbox"/> YES <input type="checkbox"/> NO		Your Last Job Title	
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____

I attest that the information contained in this form is accurate to the best of my knowledge. _____

Signature / Date