

Hotel Baker

100 W. Main Street St. Charles, IL 60174

APPLICATION FOR EMPLOYMENT

Position(s) Applied For: _____ Date of Application: _____

Name: _____

Address: _____

Telephone: (____) _____ Pager/Etc.: (____) _____ Social Security #: _____

Home E-Mail _____

If necessary, best time to call you at home is: _____ AM/PM

May we contact you at work? YES/NO

If yes, work number and best time to call (____) _____ :AM/PM

If you are under 18 and it is required, can you furnish a work permit? YES/NO

If no, please explain _____

Have you submitted an application here before? YES/NO

If yes, give date(s) _____

Have you ever been employed here before? YES/NO

If yes, give date(s) _____

Are you legally eligible for employment in this country? YES/NO

Date available for work: _____

Type of employment desired: Full-Time _____ Part-Time _____ Temporary _____ Other _____

Schedule preferred: _____

Are you able to meet the attendance requirements of the position? YES/NO

Will you work overtime if required? YES/NO

If no, please explain _____

Have you ever been bonded? YES/NO

Have you been convicted of a crime in the last seven (7) years? YES/NO

If yes, please explain: _____

CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. EACH INSTANCE AND EXPLANATION WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH YOU ARE APPLYING.

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

EMPLOYMENT HISTORY

Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

Employer: _____ Telephone (____) _____

Address: _____

Job Title: _____ Immediate Supervisor: _____

May we contact as a reference? YES/NO Dates Employed (including Month and Year): _____

Summarize the Type of Work: _____

Starting salary: _____ Ending Salary: _____

Reason for leaving _____

Employer: _____ Telephone:(____) _____

Address: _____

Job Title: _____ Immediate Supervisor: _____

May we contact as a reference? YES/NO Dates Employed (including Month and Year): _____

Summarize the Type of Work: _____

Starting salary: _____ Ending Salary: _____

Reason for leaving: _____

Employer: _____ Telephone:(____) _____

Address: _____

Job Title: _____ Immediate Supervisor: _____

May we contact as a reference? YES/NO Dates Employed (including Month and Year): _____

Summarize the Type of Work: _____

Starting salary: _____ Ending Salary: _____

Reason for leaving: _____

EDUCATIONAL BACKGROUND

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank. E. Major Field of Study. F. Minor Field of Study (if applicable).

School	# yrs. Completed	Degree/Diploma	GPA/Rank	Major	Minor

REFERENCES

List name and telephone number of three business/work references who are not related to you.

Name	Company	Title	Telephone/E-mail	Years known

ADDITIONAL INFORMATION

List professional, trade, business, or civic associations and any offices held. EXCLUDE MEMBERSHIPS THAT WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, DISABILITY OR ANY OTHER SIMILARLY PROTECTED STATUS.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

List any additional information you would like us to consider.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant: _____

Date: _____