

LEGACY HOTEL GROUP JOB APPLICATION

Legal First Name: _____ Preferred Name: _____ Last Name: _____

Mailing Address: _____ Apt/Unit: _____

City: _____ State: _____ Zip: _____

Primary Phone: (_____) _____ Secondary Phone: (_____) _____

E-mail Address: _____

Position(s) applying for: _____

All selected applicants are required to submit proof of their eligibility to work in the United States within 3 days of hire

What interests you in this position?

Employment status seeking: Full-time Part-time Seasonal

When would you be available to start? _____

Where did you hear about this opportunity ?

Indeed.com Newspaper Career Builder Craigslist Referral: _____ Other: _____

Have you been previously employed by this property in the past? Yes No

If yes, when? _____

AVAILABILITY							
<i>**Please note hotels are 24 hours a day, 7 days a week, 365 days a year. Most positions require weekend and holiday availability**</i>							
	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
6a-3p							
2p-11p							
10p-7a							

Availability comments:

Organizations, Associations and Volunteering

Please list any professional organizations and associations you belong to or volunteer for (You are not required to list any which reveal your race, age, religion, sex, national origin, marital status, disability or handicap)

Education history

High School/GED: _____ Graduated? Yes No
College: _____ Graduated? Yes No
Field of study: _____

Employment history

Please list your 3 most recent employers

Employer: _____	Phone Number: _____
Your Title: _____	Dates of Employment: _____ to _____
Reason for Leaving? _____	
Job Duties: _____ _____ _____	

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Your Title: _____	Dates of Employment: _____ to _____
Reason for Leaving? _____	
Job Duties: _____ _____ _____	

Hospitality Investors is an equal opportunity employer. Hospitality Investors will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in an undue hardship. This includes all aspects of employment including: selection, job assignment, compensation, discipline, termination and access to benefits and training.

I certify the information provided is accurate and true.

Signature

Date

REFERENCES

Please use former supervisors, coworkers, instructors who are familiar with your work. Do not list relatives or people you do not want to be contacted.

Name: _____ Position: _____ Phone Number: _____
Type of Acquaintance: _____ Employer: _____
Number of Years Known: _____

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Below are 3 releases of information for us to be able to obtain reference checks from your previous employer(s). Please complete each box for your 3 most recent employers. Failure to obtain references may lead to termination of offer of employment with Legacy Hotel Group.

REFERENCE RELEASE

I, _____, (printed first and last name) release _____ (previous employer) to disclose information regarding performance, attendance and disciplinary information to Legacy Hotel Group.

Signed Date

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