



GLENWOOD HOT SPRINGS

An Equal Opportunity Employer

We do not discriminate on the basis of race, religion, national origin, color, sex, age, disability or any legally protected status. It is our intention that all applicants be given equal opportunity and that selection decisions are based on job-related factors.

APPLICATION FOR EMPLOYMENT

Instructions Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Personal Data

Job Applied For _____ Today's Date _____

Are you seeking: Full-time Part-time Seasonal employment? When could you start work? _____

Will you work overtime if asked? _____

Are you available to work varying shifts? _____

How did you find out about this opening? _____

_____ Last Name First Name Middle Name Telephone Number

Present Street Address City State Zip Code E-mail Address

Are you over 18 years of age?Yes No

If you are under 18 years of age, what is your date of birth _____ (for jobs with minimum age requirements)

If you are applying for a job with minimum age requirements, you may be required to submit proof of age.

If hired, can you furnish proof you are eligible to work in the U.S.?Yes No

General

Were you ever employed here?Yes No When? _____

Have you ever applied here before?Yes No When? _____

Have you ever been convicted of any law violation?Yes No

(Include any plea of "guilty" or "no contest." Exclude minor traffic violations.)

If yes, give details _____

(A conviction will not necessarily disqualify an applicant for employment.)

For Driving Jobs Only: Do you have a valid drivers license?Yes No

Drivers License Number _____ Class of License _____ State _____

Have you had your drivers license suspended or revoked in the last 3 years?Yes No

If yes, give details _____

Education

Name and Location of School	Subjects Studied	Diploma/ Degree/ Certificate	Number of Years Completed?

Work History

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. **Note: A job offer may be contingent upon acceptable references from current and former employers.**

NAME OF EMPLOYER		JOB TITLES AND DUTIES
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM _____ TO _____
CITY, STATE, ZIP CODE		PAY: START \$ _____ FINAL \$ _____
SUPERVISOR(S)	TELEPHONE	Reason For Leaving
NAME OF EMPLOYER		JOB TITLES AND DUTIES
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM _____ TO _____
CITY, STATE, ZIP CODE		PAY: START \$ _____ FINAL \$ _____
SUPERVISOR(S)	TELEPHONE	Reason For Leaving
NAME OF EMPLOYER		JOB TITLES AND DUTIES
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM _____ TO _____
CITY, STATE, ZIP CODE		PAY: START \$ _____ FINAL \$ _____
SUPERVISOR(S)	TELEPHONE	Reason For Leaving

Have you ever worked or attended school under any other names?Yes No
 If yes, give names: _____

Were you absent from your job during the past six months for reasons other than an approved leave?Yes No
 If yes, how much? _____

Are you now or do you expect to be engaged in any other business or employment outside of our job?Yes No
 If yes, please explain _____

Are you presently employed?Yes No
 If yes, whom do you suggest we contact? _____

Special Skills

What skills or additional training do you have that are related to the job for which you are applying? _____

What machines or equipment can you operate that are related to the job for which you are applying? _____

Do you type? (For Office Jobs Only)Yes No Words Per Minute _____

Do you have any other skills you wish to mention? _____

Affidavit, Consent and Release

Please read each statement carefully before signing

I certify that all information in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Only the general manager of the organization has the authority to enter into an agreement of employment for any specified period and such agreement must be in writing, signed by the general manager and the employee. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reason and with or without notice.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____