

The CLIFF HOUSE

Resort & Spa

APPLICATION FOR EMPLOYMENT

Date _____

We appreciate your interest in our organization and will be happy to explore the possibilities of your joining our staff. It is our policy to seek, employ and assign the best qualified personnel in all of our departments and to provide equal opportunities in a manner which will not unlawfully discriminate against any person because of race, color, religion, sexual orientation, marital status, age, national origin or physical or mental disability.

PERSONAL INFORMATION

Name	(Last)	(First)	(MI)	Social Security Number
Present Address	(No.)	(Street)	(Apt #)	(City, State, Zip Code)
Home Telephone	Business Telephone		Do you have a legal right to work in the U.S.?	Are you under the age of 18?
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Position Desired			Full Time? <input type="checkbox"/> Part Time? <input type="checkbox"/>	Salary Desired

How were you informed of employment at The Cliff House?

Have you ever been employed here before? YES NO
If YES, give dates

Do you have any relatives employed here? YES NO
If YES, give name, relationship & department

Have you been convicted of a crime within the last 10 years? * YES NO
If YES, please explain

**Note: A conviction will not necessarily bar you from employment, but will be judged on its own merits with respect to time, circumstances as it relates to employment consideration*

Are you able to perform essential functions of the job with or without reasonable accommodation? YES NO

If necessary, will you relocate? YES NO

When will you be available for work?

For reference checking purposes ONLY, is there another name you are (or have been) known by? YES NO
If YES, please print

Check skills at which you are experienced (when appropriate):

- | | |
|---|--|
| <input type="checkbox"/> 10 Key Calculator (<input type="checkbox"/> Sight <input type="checkbox"/> Touch) | <input type="checkbox"/> Filing |
| <input type="checkbox"/> Typing WPM _____ | <input type="checkbox"/> Word Processing |
| <input type="checkbox"/> Computer (particular types or programs) _____ | <input type="checkbox"/> Telephone Switchboard |

If applying for a position requiring the use of a vehicle, please complete the following:

Are you licensed to drive? YES NO Type of license: Operators Chauffeur State: _____
Is license under any type of restriction or suspension? YES NO
Have you had any moving violations within the last 5 years? YES NO

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EDUCATIONAL BACKGROUND

Name & Address of School	Years Completed	Did You Graduate	Course of Study
High School			
College			
Other			

EMPLOYMENT HISTORY

Provide the following information for your past four (4) employers, assignments or volunteer activities, starting with the present or most recent.

From	To	Employer	Telephone ()
Job Title		Address	
Supervisor/Title		Summarize the nature of work performed and job responsibilities	
Reason For Leaving		Hourly rate/salary Start \$ _____ Per _____ Final \$ _____ Per _____	

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PLEASE COMPLETE THIS PAGE ONLY IF REQUESTED

WORK BACKGROUND

If you have previously held Administrative positions, please summarize specific experience:

What responsibility for Policy Administration/Formulation Years of experience _____ What Kinds of Policies?

Responsibility for Program Initiation or Development

Years of experience _____ What Kinds of Programs?

Types of Technical/Professional projects involved with prior positions

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Are there any other experiences, skills or qualifications which you feel would especially qualify you for employment at The Cliff House?

REFERENCES

Name	Telephone	Relationship/Years Known

PLEASE READ THE FOLLOWING BEFORE SIGNING THIS APPLICATION:

I understand that:

1. I hereby certify that the information contained in this application is true and complete. Any false statements or omissions on this application may result in my immediate dismissal.
2. In processing this employment application, The Cliff House is authorized to conduct an investigation of my personal history for purposes of determining my qualifications for employment. Such investigation may include obtaining an investigative consumer report and contacting my previous employers and other references listed on this application. I hereby authorize my previous employers and my references to give The Cliff House any information concerning my previous employment and any other pertinent information concerning my professional competence, ethics, character, and other qualifications for employment.
3. I understand that I may be required to take a physical examination at Cliff House expense to assist in determining my employment eligibility, and that would take place after the offer of employment.
4. I also understand that if employed, both The Cliff House and I will have the right to terminate my employment at any time with or without cause, and that no one has any authority to make any representation or agreement to the contrary.
5. If employed, I will be required to furnish sufficient proof as to satisfy government regulations regarding my eligibility of employment in the United States.
6. I understand that since the Hotel is in operation 24 hours a day, seven days a week, the following conditions may be mandatory: overtime, rotation of shifts, weekend work and holiday work.

 (Date)

 (Signature)