

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

PLEASE COMPLETE ENTIRELY AND SUBMIT WITH RESUME.



DATE \_\_\_\_\_

Name \_\_\_\_\_

Last First Middle Maiden

Present address \_\_\_\_\_

Number Street City State Zip

Mailing address \_\_\_\_\_

(If different) Number Street City State Zip

How long at present address \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone I ( ) \_\_\_\_\_ Telephone II ( ) \_\_\_\_\_ If under 18, please list age \_\_\_\_\_

(Be specific):

Position applied for (1) \_\_\_\_\_ and salary desired \_\_\_\_\_

Position applied for (2) \_\_\_\_\_ and salary desired \_\_\_\_\_

Days/hours available to work

No Pref Thur How many hours can you work weekly? \_\_\_\_\_

Mon Fri Can you work nights? \_\_\_\_\_

Tue Sat

Wed Sun

Employment desired  FULLTIME ONLY  PARTIME ONLY  FULLOR PART-TIME

When available for work? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY?  No  Yes

If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? \_\_\_\_\_



**Please list two references other than relatives or previous employers.**

Name \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

E-Mail: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

Please use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying: \_\_\_\_\_  
\_\_\_\_\_

**MILITARY** HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

**EDUCATION:** NUMBER OF YEARS COMPLETED SCHOOL, MAJOR & DEGREE *(you may skip this if clearly outlined on resume)*

High School \_\_\_\_\_

College \_\_\_\_\_

Bus. or Trade School \_\_\_\_\_

Professional School \_\_\_\_\_

**Work Experience I:** Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary. *(You may skip this if clearly outlined on resume)*

Name of employer \_\_\_\_\_ Address/Town \_\_\_\_\_

Name of last supervisor \_\_\_\_\_ Employment dates \_\_\_\_\_ Pay or salary \_\_\_\_\_

Phone number \_\_\_\_\_ E-Mail: \_\_\_\_\_

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: \_\_\_\_\_



**Work Experience II:** Please list your work experience for the past five years beginning your most recent job held. If you were self-employed, give firm name. Attach additional sheets necessary. *(You may skip this if clearly outlined on resume)*

Name of employer \_\_\_\_\_ Address/Town \_\_\_\_\_

Name of last supervisor \_\_\_\_\_ Employment dates \_\_\_\_\_ Pay or salary \_\_\_\_\_

Phone number \_\_\_\_\_ E-Mail: \_\_\_\_\_

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: \_\_\_\_\_

**Work Experience III:** Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary. *(You may skip this if clearly outlined on resume)*

Name of employer \_\_\_\_\_ Address/Town \_\_\_\_\_

Name of last supervisor \_\_\_\_\_ Employment dates \_\_\_\_\_ Pay or salary \_\_\_\_\_

Phone number \_\_\_\_\_ E-Mail: \_\_\_\_\_

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: \_\_\_\_\_

May we contact your present employer?  Yes  No Did you complete this application yourself  Yes  No

**AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)**

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with [the Company] creates an actual or implied contract of employment. I understand that, if I accept employment with [Company Name], it will be on an at-will basis. This means that either [Company Name] or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by [Company Name]. I release [Company Name], and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.



I authorize [Company Name] to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release [Company Name] and its employees from all liability arising from such investigation.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_

Cle Hospitality is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Cle Hospitality depends solely on your qualifications.