

Employment Application



In order for you to be considered for employment, this application must be filled out COMPLETELY. Please write N/A for information not applicable. Resumes though welcome should not be submitted in place of the information requested below

Please Print

First Name	Middle Name	Last Name	Social Security Number or other ID Number	Today's Date	
Current Address	Street/P.O. Box	Apt #	City	State	Zip
Permanent Address	Street/P.O. Box	Apt #	City	State	Zip
Day Phone No. ()	Evening Phone No. ()	Alternate Phone Number (<input type="radio"/> Pager <input type="radio"/> Cell <input type="radio"/> Other) ()			
For which position are you applying?			Date you are available for employment:		
What is the minimum amount of money you need to make?			\$ _____/hour	\$ _____/week	

1. If hired, can you submit for examination and copying documents required to prove your identity and legal eligibility to work in the United States? (A complete list of these documents is available upon request) Yes No

2. Are you of legal age to work in the United States? Yes No

3. If hired, can you submit proof of age? Yes No

4. Have you ever been convicted of a felony? Yes No

5. How many jobs have you held in the last two years? 0 1 2 3 4 or more

6. Have you ever been terminated from a job? Yes No

If yes, how many have you been terminated from? 0 1 2 3 4 or more

7. You want to work? Part-time (_____ hours per week) Full-time (_____ hours per week)

9. In the table below, please indicate the days you **CAN** work. List the earliest and latest times you **CAN** work. Please account for travel time to and from other obligations (e.g. sports, classes, meetings, etc.) Being on time for shift is **MANDATORY**

	MON	TUES	WED	THUR	FRI	SAT	SUN
Earliest Time In							
Latest Time Out							

10. Do you have reliable means of transportation to and from work for the days and times you are available? Yes No

11. Are you available to work holidays and weekends? Yes No

12. Is your schedule flexible to attend training classes? Yes No

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Thompson Hospitality that such employment with the company is at will, for no specified duration and may be terminated by either the company or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of the company or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of the company except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of Thompson Hospitality.

In consideration for employment with the company, if employed, I agree to conform to the rules, regulations, policies and procedures of the company at all times and understand that such obedience is a condition of employment. I understand that due to the nature of the company business, attendance and punctuality are considered essential requirements of every job at Thompson Hospitality and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with the company, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employments tests and checks will result in withdrawal of any employment offer or termination of employment if already employed. I also understand that if offered a position with Thompson Hospitality, I will have a 90-day probation period.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Thompson Hospitality and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

By signing below, I acknowledge that I have read, understood and agree to the above statements.

Signature

Date