(FOR OFFICE USE ONLY)

Referred by\_\_\_\_\_\_\_\_\_\_\_\_-Checked References? Y/N Hired Y/N-Position/Location\_\_\_ \_Starting Date\_\_\_\_\_\_\_

|  |
| --- |
| **TYGATE MOTEL CORPORATION EMPLOYMENT APPLICATION**1076 Williston Road, South Burlington, VT 05403Best Western Windjammer Inn & Conference CenterWindjammer RestaurantWe consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria. |

POSITION APPLIED FOR: TODAY'S DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE NUMBER ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

ADDRESS: \_\_\_\_\_\_

 Street City State Zip

ARE YOU 18 YEARS OR OLDER? YES NO \_\_\_\_

IF NO, AND IT IS REQUIRED, CAN YOU FURNISH A WORK PERMIT? YES\_\_\_\_\_ NO \_\_\_\_\_

HAVE YOU EVER BEEN EMPLOYED BY THE TYGATE COMPANIES BEFORE? YES NO\_\_\_\_\_\_

Which property did you work for? When:\_\_\_\_\_\_\_\_\_\_\_\_\_

DRIVER'S LICENSE NUMBER (If driving is an essential job function):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE:\_\_\_\_

(Many hotel positions require driving company vehicles.)

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES? YES\_\_\_\_\_ NO \_\_\_\_\_

(Applicants who are hired must provide documentation of employment eligibility within the first three days of hire. Providing false documentation or making false statements will result in immediate dismissal)

HAVE YOU BEEN CONVICTED OF A CRIME IN THE PAST 7 YEARS? YES\_\_\_\_\_ NO\_\_\_\_\_

IF YES PLEASE EXPLAIN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(A conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying)

**EDUCATIONAL HISTORY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EDUCATION** | **NAME AND LOCATION OF SCHOOL**  | **GRADUATE** **YES/NO** | **YEARS COMPLETED** | **DEGREE OBTAINED** |
| **HIGH SCHOOL** |  |  |  |  |
| **COLLEGE** |  |  |  |  |
| **COLLEGE** |  |  |  |  |
| **TRADE, BUSINESS OR CORRESPONDENCE SCHOOL** |  |  |  |  |

**EMPLOYMENT HISTORY Provide the following information for your last four employers, starting with most recent.**

|  |  |  |  |
| --- | --- | --- | --- |
| From: | To: | Employer: | Phone: |
| Job Title: | Address: |  |
| Supervisor’s Name: | Description of Duties: |  |
| Hourly Rate/Salary | Reason for leaving: |  |
| From: | To: | Employer: | Phone: |
| Job Title: | Address: |  |
| Supervisor’s Name: | Description of Duties: |  |
| Hourly Rate/Salary: | Reason for leaving: |  |
| From: | To: | Employer: | Phone: |
| Job Title: | Address: |  |
| Supervisor’s Name: | Description of Duties: |  |
| Hourly Rate/Salary: | Reason for leaving: |  |
| From: | To: | Employer: | Phone: |
| Job Title: | Address: |  |
| Supervisor’s Name: | Description of Duties: |  |
| Hourly Rate/Salary: | Reason for leaving: |  |

DAYS AND HOURS YOU ARE ABLE TO WORK: MONDAY\_\_\_\_\_\_\_\_TUESDAY\_\_\_\_\_\_\_\_WEDNESDAY\_\_\_\_\_\_\_\_

THURSDAY\_\_\_\_\_\_\_\_FRIDAY\_\_\_\_\_\_\_\_SATURDAY\_\_\_\_\_\_\_\_SUNDAY\_\_\_\_\_\_\_\_

DO YOU WANT PART TIME \_\_\_\_\_\_ OR FULL TIME \_\_\_\_\_\_\_ EMPLOYMENT (CHECK ONE).

ARE YOU EMPLOYED NOW? YES NO IF YES, CAN WE CONTACT YOUR CURRENT EMPLOYER? YES--------- NO---------

**REFERENCES: (**Give names of two persons not related to you, whom you have known at least one year.)

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | ADDRESS | NO.OF YEARS ACQUAINTED | PHONE |
| 1 |  |  |  |
| 2. |  |  |  |

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I understand that if employed, the first 90 days are a probationary period and not a guarantee of continued employment. All employees of the Company are employees at will and are free to resign at any time with or without reason. The Company, likewise, retains the right to terminate an employee's employment at anytime, with or without reason or notice.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature Date**