

LA POSADA HOTEL

An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT (Please Read Before Filling out This Application)

La Posada Hotel, does not discriminate in hiring or employment on the basis of race, color, religion, national origin, disability, sex, age, height, weight, marital status, or other legally protected group characteristics. Although this application may be given consideration, its receipt does not imply that there are open positions or that the applicant will be employed. La Posada Hotel reserves its right to withdraw any offer of employment at any time and without responsibility for any actions taken or expenses incurred by applicant; similarly, the applicant has the right to withdraw this application at any time and without responsibility for any actions taken or expenses incurred by La Posada Hotel. If you wish to submit a resumé, you may attach it to this application but, in addition, you must complete this application and answer *all* questions, even those which relate to information on your resumé. If you previously sent us your resumé, please attach an additional copy to this completed application form and return both to us. Please be sure that all of your answers on this application are complete, correct, and truthful. Even if you are employed, you should understand that any omission of relevant information, any attempt to create a misimpression, or any false or misleading statement will result in dismissal. *Answer all questions. You will not be considered as a candidate for a job with La Posada Hotel until we have received this application fully completed and signed by you.*

PERSONAL INFORMATION

TODAY'S DATE _____

PRINT YOUR FULL NAME

(First) (Middle) (Last)

Current Address _____
(Number) (Street)

(if different from current address)

Permanent Address _____
(Number) (Street)

(City) (State) (Zip Code)

(City) (State) (Zip Code)

(_____) _____
(Current Telephone Number)

(e-mail)

(_____) _____
(Permanent Telephone Number)

(1) Are you over the age of 18 years? Yes _____ No _____ (if no, you may be required to provide authorization)

(2) Are you legally eligible to work in the United States? Yes _____ No _____

[You will be required to provide documentation and complete Immigration and Naturalization Service Form I-9.]

(3) Do you have any activities, commitments, or responsibilities which might in any way restrict the hours or days you can work? Yes _____ No _____

If yes, please explain: _____

PLEASE NOTE: *La Posada Hotel operates seven days a week and twenty-four hours every day. La Posada Hotel employees may be scheduled for split shifts. All La Posada Hotel employees are required to work when scheduled, including working every day at times.*

EMPLOYMENT REQUEST - [If you have previous experience in these jobs, please be sure to list under Employment Record.]

(1) Type of work desired (1) _____ (2) _____ (3) _____
Position Position Position

(2) How were you referred to us? _____

(3) If you replied in response to an advertisement, where did you see the ad? _____

(4) Have you applied here previously? Yes _____ No _____ If yes, when? _____

(5) Have you worked at La Posada Hotel previously? Yes _____ No _____ If yes, what dates? _____ to _____

Position(s) in which you worked: _____ Supervisor(s): _____

(6) You may, at your option, list any friends or relatives who are present or former La Posada Hotel employees:

EDUCATION

GRAMMAR SCHOOL	CITY	STATE	Highest Grade Completed
HIGH SCHOOL	CITY	STATE	Last Grade Completed: (Circle) 9 10 11 12 Graduate? _____
COLLEGE / UNIVERSITY (Circle)	CITY	STATE	Number of Years Completed: 1 2 3 4 Graduate? _____
TRADE / BUSINESS / OTHER (Circle)	CITY	STATE	Number Years Completed: 1 2 3 4 Graduate? _____

Vocational, technical, business, or secretarial courses studied:

GENERAL INFORMATION

List any types of computer software / equipment and other office equipment you can use proficiently: _____

_____ Typing (w.p.m.)? _____

List any special skills, knowledge, certification, or experience which you feel may be relevant to the job(s) you are seeking: _____

Are you planning to pursue or are you currently enrolled in any studies or courses? Yes _____ No _____

If yes, where, for what period of time, and for what courses are you enrolled? _____

EMPLOYMENT RECORD [Do not state "See Resumé." Please complete your employment history even if a resumé is submitted.] Starting with PRESENT or MOST RECENT employers. You may, at your option, list only employers located within the United States. Include self-employment, summer, and part-time jobs.

EMPLOYER (CURRENT OR MOST RECENT) ADDRESS, CITY, STATE, ZIP CODE	DATE STARTED _____	PAY AT START _____
_____	DATE LEFT _____	PAY AT LEAVING _____
SUPERVISOR/TELEPHONE	POSITION HELD	MAY WE CONTACT YOUR EMPLOYER? Yes or No If no, please explain:
_____	_____	_____

DUTIES OR RESPONSIBILITIES _____

REASON FOR LEAVING _____

EMPLOYMENT RECORD - CONTINUED

EMPLOYER ADDRESS, CITY, STATE, ZIP CODE _____ DATE STARTED _____ PAY AT START _____

_____ DATE LEFT _____ PAY AT LEAVING _____

SUPERVISOR/TELEPHONE _____ POSITION HELD _____ MAY WE CONTACT YOUR EMPLOYER?
Yes or No If no, please explain: _____

DUTIES OR RESPONSIBILITIES _____

REASON FOR LEAVING _____

EMPLOYER ADDRESS, CITY, STATE, ZIP CODE _____ DATE STARTED _____ PAY AT START _____

_____ DATE LEFT _____ PAY AT LEAVING _____

SUPERVISOR/TELEPHONE _____ POSITION HELD _____ MAY WE CONTACT YOUR EMPLOYER?
Yes or No If no, please explain: _____

DUTIES OR RESPONSIBILITIES _____

REASON FOR LEAVING _____

EMPLOYER ADDRESS, CITY, STATE, ZIP CODE _____ DATE STARTED _____ PAY AT START _____

_____ DATE LEFT _____ PAY AT LEAVING _____

SUPERVISOR/TELEPHONE _____ POSITION HELD _____ MAY WE CONTACT YOUR EMPLOYER?
Yes or No If no, please explain: _____

DUTIES OR RESPONSIBILITIES _____

REASON FOR LEAVING _____

(1) If you are now employed, why do you want to change your job?

(2) Have you ever been fired, dismissed, asked to resign, or otherwise been terminated from any job?

Yes _____ No _____ If yes, what job(s), when, and why? _____

(3) If you are now employed, may we contact your present employer? Yes _____ No _____ If no, please explain: _____

If yes, please list name, position, and telephone number of the person to contact:

REFERENCES

Please list three persons who are not related to you or previous supervisors, who can provide professional references.

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP/OCCUPATION	YEARS KNOWN
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(1) _____

(2) _____

(3) _____

CRIMINAL BACKGROUND Persons who have been convicted or who have pled guilty or "no contest" to any felony, or to a misdemeanor involving violence, criminal sexual conduct, theft or dishonesty, or drugs and other controlled substances, cannot work at La Posada Hotel. The safety and security of La Posada Hotel guests preclude employment. A criminal background check is made on each and every applicant hired.

(1) Have you ever pled guilty or "no contest" to or been convicted of a crime involving dishonesty (including, but not limited to, theft, shoplifting, robbery, embezzlement, forgery, etc.), any crime pertaining to drugs or controlled substances, any crime involving violence (including domestic violence), or criminal sexual conduct? Yes _____ No _____ If yes, explain _____

(2) Have you ever pled guilty or "no contest" to or been convicted of **any** other crime (except minor traffic offenses)?

Yes _____ No _____ If yes, explain _____

(3) Are you currently under indictment, arraignment, or charged with a felony? Yes _____ No _____ If yes, explain: _____

AUTHORIZATION AND WAIVER

I authorize all previous employers, law enforcement agencies, and individuals with personal knowledge to disclose to La Posada Hotel, or to its agent, any and all information in their possession about my employment history (including disciplinary and other matters), personal background and criminal record. I hereby waive written or other notice to me of the release of any information to La Posada Hotel.

For the purposes of this Authorization and Waiver, a photocopy of my signature shall have the same force and effect as my original signature.

(Please Print Full Name)

Signature

Date