Employment Application- 2 Pages 2013

Geneva-on-the-Lake Resort

Complete application, print and call (440) 466-8650 for interview. Or save as attachment & email to gotl@roadrunner.com

		Applicant	Informatio	n						
Full Name:				Da	te:					
۸ ططعممه	Last First				M.I					
Address:	Street Address		Apartment/Unit #							
	City				Sta	te	ZIP Co	de		
Cell:		E-ma	ail Address:							
Home Phone: Social S		ocial Security No.:	Security No.:			Date of birth:				
Position Applied for:		Salary Desi	ired: \$	Date Available:				\/=0		
Are you a cit	izen of the United States?		f no, are yo	you authorized to work in the U.S.?				YES	NO	
Have you ev	er worked for this compan	y? 🗌 🗎 If	YES NO If yes, when?			1?				
Have you ev	er been convicted of a feld	ony?	f yes, expla	in						
		Educ	cation							
High School:	:	Address:								
From:	To:	Did you graduate?	YES	NO	Degree:					
College:		Address:								
From:	То:	Did you graduate?	YES	NO	Degree:					
Other:		Address:								
From:	To:	Did you graduate?		NO	Degree:					
		Previous E	-mploymei	nt						
Company:					Phone:	()				
Address:					Supervisor:					
Job Title:		Starting Sa	alary: \$			Endin	g Salary:	\$		
Responsibilit	iies:									
From:	To:	Reason for Lea	-							
May we cont	act your previous supervis	sor for a reference?	YES	NO 						
Company:					Phone:	()				
Address:					Supervisor:					
Job Title:		Starting Sa	alary: \$			Ending	g Salary:	\$		
Responsibilit	ies:									
From:	То:	Reason for Lea	aving:							
May we contact your previous supervisor for a reference?										

Company:				Phone:	()		
Address:				Supervisor:				
Job Title:		Starting Salary: \$			End	ding Salary:	\$	
Responsibilities:								
From:	To: F	Reason for Leaving:						
May we contact your prev	vious supervisor for a refe	erence?	NO					
		References						
Please list three referen	ces. (No Relatives)							
Full Name:		Relationsh	hip:					
Company:				Phone:	()		
Address:								
Full Name:		Relationsh	hip:					
Company:				Phone:	()		
Address:								
Full Name:		Relationsh	hip:					
Company:				Phone:	()		
Address:								
		Military Service	<u> </u>					
		mintary Service	,	_		_		
Branch:		_	(D:	From:		To:		
Rank at Discharge:		Туре	of Dis	scharge:				
If other than honorable, e	xpiain:							
		Emergency Conta	act					
Contact:		Ô^ ÁPh[} ^K						
Relationship:	ship: P[{ ^ÁÚ@}}^K							
		Disclaimer and Sign	ature					
I certify that my answers are true and complete to the best of my knowledge.								
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.								
Signature:					Date	:		
	<u> </u>	<u> </u>						