



## Employment Application

APPLICANT INFORMATION				
Last Name		First		M.I.   Date
Street Address			Apartment/Unit #	
City		State		ZIP
Phone		E-mail Address		
Date Available		Social Security No.		Desired Pay Rate
Position Applied for				
Hours and Days available to work (*Some holidays and weekends are required)				
Mon _____ Tues _____ Wed _____ Thursday _____ Friday _____ Saturday _____ Sunday _____ Other Comments on availability : _____				
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>				
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when? _____				
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain _____				
EDUCATION				
High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
REFERENCES				
<i>Please list two professional references , other than your parents or relatives.</i>				
Full Name		Relationship		
Company		Phone ( )		
Address				
Full Name		Relationship		
Company		Phone ( )		
Address				

**PREVIOUS EMPLOYMENT**

Company		Phone (    )		
Address		Supervisor		
Job Title	Starting Pay Rate	\$	Ending Pay Rate	\$
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>				
Company		Phone (    )		
Address		Supervisor		
Job Title	Starting Pay Rate	\$	Ending Pay Rate	\$
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>				

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

**SKILLS AND STRENGTHS**

Please give a brief list and/or description of your skills and strengths you will bring to Whispering Pines Bed and Breakfast.

  
  
  
  
  
  
  
  
  
  

**DISCLAIMER AND SIGNATURE**

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
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