

# DOHERTY HOTEL

APPLICATION FOR EMPLOYMENT  
(AN EQUAL OPPORTUNITY EMPLOYER)

## PERSONAL INFORMATION

FIRST NAME	MIDDLE NAME	LAST NAME	
PRESENT ADDRESS	CITY	STATE	ZIP
PRESENT ADDRESS	CITY	STATE	ZIP
TELEPHONE NUMBER	CELL PHONE NUMBER	DATE OF BIRTH	
EMAIL ADDRESS			
HAVE YOU EVER BEEN CONVICTED OF A FELONY?			

## EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	WAGE DESIRED
ARE YOU EMPLOYED NOW?	IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER?	
HAVE YOU APPLIED TO THE DOHERTY HOTEL BEFORE?	WHEN?	

## EDUCATION

HIGH SCHOOL NAME	CITY	STATE
NUMBER OF YEARS ATTENDED	DID YOU GRADUATE?	
COLLEGE OR UNIVERSITY NAME	CITY	STATE
NUMBER OF YEARS ATTENDED	DID YOU GRADUATE?	
TRADE OR BUSINESS SCHOOL NAME	CITY	STATE
NUMBER OF YEARS ATTENDED	DID YOU GRADUATE?	
PLEASE LIST ANY RELEVANT SKILLS OR KNOWLEDGE YOU POSSESS		

## OFFICE USE ONLY

INTERVIEWED BY		DATE
HIRED	POSITION	DEPARTMENT
WAGE	START DATE	REMARKS
SS#	DOB	EMAIL:

**FORMER EMPLOYERS** (LIST LAST FOUR, STARTING WITH MORE RECENT)

NAME OF EMPLOYER	FROM	TO	POSITION	SALARY
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ADDRESS	CITY	STATE	ZIP
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REASON FOR LEAVING
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NAME OF EMPLOYER	FROM	TO	POSITION	SALARY
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ADDRESS	CITY	STATE	ZIP
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REASON FOR LEAVING
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NAME OF EMPLOYER	FROM	TO	POSITION	SALARY
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ADDRESS	CITY	STATE	ZIP
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REASON FOR LEAVING
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NAME OF EMPLOYER	FROM	TO	POSITION	SALARY
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ADDRESS	CITY	STATE	ZIP
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REASON FOR LEAVING
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**REFERENCES** (GIVE THE NAMES OF PERSONS NOT RELATED TO YOU, WITH WHOM YOU HAVE KNOWN AT LEAST ONE YEAR)

NAME	TELEPHONE NUMBER	YRS. ACQUAINTED
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ADDRESS	CITY	STATE	ZIP
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NAME	TELEPHONE NUMBER	YRS. ACQUAINTED
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ADDRESS	CITY	STATE	ZIP
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NAME	TELEPHONE NUMBER	YRS. ACQUAINTED
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ADDRESS	CITY	STATE	ZIP
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**EMERGENCY CONTACT**

NAME	TELEPHONE NUMBER
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ADDRESS	CITY	STATE	ZIP
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**ACKNOWLEDGEMENT**

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 PVIOUS 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 AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

SIGNATURE	DATE
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