

Date: _____

Employment Application

Last Name: _____ First Name: _____ MI: _____

Social Security #: _____ Email Address: _____

Present Address

Street: _____ City: _____

Zip Code: _____ Phone #: _____ Cellular #: _____

How Long have you lived at this address? _____ Are you 18 years or older? _____

Have you had any name changes this employer should know about in order to verify job
or educational history? If so state previous name: _____

Have you ever been convicted of a crime or felony? If yes, please explain: _____

Do you have transportation to and from work? _____

Are you authorized to work in the United States? _____

Position applying for: _____ Date you can start: _____

Wage Desired: _____ How did you hear about this position? _____

Are you applying for: Full Time Part Time

What days are you available to work? _____

Have you worked with us before? _____ If so, when? _____

If required, would you be able to work overtime? _____

Are you able to work evenings and weekends? _____

What skills do you have that would be important for this position? _____

Education

High School: _____ Number of years attended: _____

College or University: _____ Number of years attended: _____

Other, please specify: _____

Military Service Schools Attended: _____

Have you ever served in the United States Armed Forces? Yes No

If so, name of branch: _____ Dates of service: _____

Highest Grade: _____

Personal References

Name: _____ How long have you known them? _____

Occupation: _____ Telephone Number: _____

Name: _____ How long have you known them? _____

Occupation: _____ Telephone Number: _____

Name: _____ How long have you known them? _____

Occupation: _____ Telephone Number: _____

Name: _____ How long have you known them? _____

Occupation: _____ Telephone Number: _____

Previous Work Experience

*List below last two employers, starting with most recent.

1. Company name: _____

Address: _____ City: _____

State: _____ Zip code: _____ Phone #: _____

Company business: _____

Your Position: _____

Immediate supervisor: _____ Title: _____

Date started: _____ Date ended: _____

Wage at start date: _____ Wage at end date: _____

Reason for leaving: _____

2. Company name: _____

Address: _____ City: _____

State: _____ Zip code: _____ Phone #: _____

Company business: _____

Your Position: _____

Immediate supervisor: _____ Title: _____

Date started: _____ Date ended: _____

Wage at start date: _____ Wage at end date: _____

Reason for leaving: _____

*Can we contact your previous employers for a reference? _____

Are there any job duties that you would be unable to perform? _____

Is there anything we could do to accommodate you so you could perform all the required

Job duties? _____

Have you ever applied to this company before? _____ If yes, when? _____

Are you now employed? _____ If yes, may we contact your current employer? _____

Phone #: _____

In case of emergency

Please contact: _____

Address: _____

Phone #: _____ Relationship: _____

1. I authorize investigation of all statements contained in this application.
2. I understand that misrepresentation or omission of facts called for is cause for dismissal and that my employment is substantially dependent on truthful answers to the forgoing inquiries.

Release

The undersigned hereby authorizes the following employer: _____ to obtain pre-employment screening information. The prospective employer agrees to keep the contents of the report confidential unless required to release the information by order of court or other legal requirement.

The undersigned hereby releases the prospective employer named herein and their heirs, agents or assigns from any and all liability now or at any future time connected with obtaining this information.

This application may be used to apply for positions at:

	The Bear's Den (TBD, LLP)
	Black Bear Lodge & Rustic Manor Motor Lodge (North Lakes Hospitality, Inc.)
	Wild Eagle Lodge (Wild Eagle Lodge, Inc.)

You hereby grant us permission to share your application with the three entities listed here to facilitate the employment process for you at any of these locations. Please cross out any facility listed above that you do not want to apply.

Print Applicant's Full Name: _____ SS#: _____

Current Address: _____

Signature of applicant: _____ Date: _____