



## EMPLOYMENT APPLICATION

### THE HOTEL CONCORD

11 South Main Street  
Concord, New Hampshire 03301

THE CIVIL RIGHTS ACT OF 1964 PROHIBITS DISCRIMINATION BECAUSE OF RACE, COLOR, SEX, RELIGION OR NATIONAL ORIGIN. PUBLIC LAW 90 702

PROHIBITS DISCRIMINATION BECAUSE OF AGE. THE LAWS OF SOME STATES PROHIBIT SOME OR ALL OF THE ABOVE TYPES OF DISCRIMINATION.

#### PLEASE PRINT

NAME (FIRST MIDDLE LAST)

SOCIAL SECURITY NO.

ADDRESS (NUMBER, STREET, CITY, STATE AND ZIP)

AREA CODE - PHONE NO.

FRIENDS OR RELATIVES OTHER THAN SPOUSE WORKING WITH US

REFERRED TO US BY

HAVE YOU EVER APPLIED FOR WORK WITH US BEFORE?  
WHEN \_\_\_\_\_ WHERE \_\_\_\_\_

YES \_\_\_\_\_

NO \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY?

YES \_\_\_\_\_

NO \_\_\_\_\_

WILL ANY PHYSICAL CONDITION LIMIT YOUR ABILITY IN ANY WAY TO FULLY PERFORM THE JOB FOR WHICH YOU ARE APPLYING? \_\_\_\_\_  
IF YES, PLEASE EXPLAIN \_\_\_\_\_

ARE YOU LEGALLY ENTITLED TO WORK IN THE UNITED STATES?

YES \_\_\_\_\_

NO \_\_\_\_\_

IS ANY ADDITIONAL INFORMATION RELATIVE TO CHANGE OF NAME, USE OF AN ASSUMED NAME OR NICKNAME NECESSARY TO ENABLE A  
CHECK ON YOUR WORK OR SCHOOL RECORDS? \_\_\_\_\_ IF YES, EXPLAIN \_\_\_\_\_

#### PERSONAL GOALS AND OBJECTIVES

FOR WHAT POSITION ARE YOU APPLYING?

WHAT IS YOUR OCCUPATIONAL GOAL?

FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_ TEMPORARY \_\_\_\_\_

SALARY REQUIREMENTS

WHEN CAN YOU START?

\$ \_\_\_\_\_ PER \_\_\_\_\_

WHAT HOURS AND DAYS ARE YOU AVAILABLE TO WORK?

WHY ARE YOU INTERESTED IN THIS PARTICULAR JOB AND THESE HOURS?

### EDUCATION

SCHOOLS ATTENDED - INCLUDE CURRENT	CITY - STATE	YEARS COMPLETED	DEGREE
HIGH SCHOOL			
COLLEGE			
OTHER			

SCHOLASTIC HONORS, SCHOLARSHIPS, FLUENT FOREIGN LANGUAGE(S), ETC. \_\_\_\_\_

WHAT JOB RELATED SERVICE OR PROFESSIONAL ORGANIZATIONS, SPECIAL SKILLS OR EXPERIENCES HAVE YOU HAD THAT WOULD ASSIST YOU IN THIS ORGANIZATION? \_\_\_\_\_

### PERSONAL REFERENCES

PLEASE PROVIDE THREE PERSONAL REFERENCES THAT ARE NOT RELATED TO YOU

NAME	ADDRESS	PHONE NUMBER

### EMPLOYMENT HISTORY

ACCOUNT FOR ALL EMPLOYMENT STARTING WITH THE MOST RECENT

**EMPLOYMENT HISTORY**

FROM	THRU	EMPLOYER	TYPE OF BUSINESS
ADDRESS		STARTING POSITION SALARY	FINAL POSITION SALARY
NAME OF FINAL SUPERVISOR		REASON FOR LEAVING	
BRIEF SUMMARY OF DUTIES			

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BRIEF SUMMARY OF DUTIES			

MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? YES \_\_\_\_\_ NO \_\_\_\_\_

**U.S. MILITARY SERVICES**

ARE YOU A VETERAN OF THE U.S. MILITARY? YES \_\_\_\_\_ NO \_\_\_\_\_

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY, THEN SIGN AND DATE IN THE SPACES PROVIDED.

I HEREBY CERTIFY THAT THE FACTS SET FORTH IN THIS EMPLOYMENT APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF I AM EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL. I AUTHORIZE MANAGEMENT TO VERIFY THE INFORMATION PROVIDED ON THIS APPLICATION.

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

