



Application for Employment

APPLICATION MUST BE COMPLETED IN FULL EVEN IF ATTACHING RESUME

PERSONAL INFORMATION			
LAST NAME	FIRST	MIDDLE	
STREET ADDRESS	CITY	STATE	ZIP CODE
PHONE NUMBER	EMAIL		
POSITION(S) DESIRED	SCHEDULE PREFERENCE <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME		
ARE YOU 18 YEARS OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU AUTHORIZED TO WORK IN THE USA? <input type="checkbox"/> YES <input type="checkbox"/> NO		

EMPLOYMENT DESIRED		
ARE YOU EMPLOYED NOW?	DATE YOU CAN START:	SALARY DESIRED:
HAVE YOU EVER WORKED FOR THIS COMPANY BEFORE?	DATES:	/
LOCATION:	REASON FOR LEAVING:	

EMPLOYMENT HISTORY	
NAME AND CITY OF LAST EMPLOYER:	
START DATE:	END DATE:
POSITION:	RATE OF PAY:
DUTIES:	
SUPERVISOR:	MAY WE CONTACT YOUR SUPERVISOR:
PHONE NUMBER:	REASON FOR LEAVING:
NAME AND CITY OF LAST EMPLOYER:	
START DATE:	END DATE:
POSITION:	RATE OF PAY:
DUTIES:	
SUPERVISOR:	MAY WE CONTACT YOUR SUPERVISOR:
PHONE NUMBER:	REASON FOR LEAVING:
NAME AND CITY OF LAST EMPLOYER:	
START DATE:	END DATE:
POSITION:	RATE OF PAY:
DUTIES:	
SUPERVISOR:	MAY WE CONTACT YOUR SUPERVISOR:
PHONE NUMBER:	REASON FOR LEAVING:

REFERENCES: Please provide 3 names of persons not related to you whom you have known for at least 1 year

NAME	RELATIONSHIP	PHONE NUMBER	YEARS KNOWN

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION	# OF YEARS	DID YOU GRADUATE	DEGREE / MAJOR
HIGH SCHOOL				
COLLEGE				
TRADE OR OTHER				

AUTHORIZATION

THE LODGE AT MAUSTON IS AN EQUAL OPPORTUNITY EMPLOYER. WE RECRUIT, HIRE AND PROMOTE EMPLOYEES WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, AGE, NATIONAL ORIGIN, CITIZENSHIP, DISABILITY, AND ALL OTHER PROTECTED CATEGORIES.

I CERTIFY THAT ALL INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND UNDERSTAND THAT IF ANY MATERIALLY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. I UNDERSTAND THAT NEITHER THE APPLICATION NOR ANY OTHER PERSONNEL FORM CONSTITUTES AN EMPLOYMENT CONTRACT.

I AUTHORIZE THE LODGE AT MAUSTON TO SOLICIT INFORMATION REGARDING MY CHARACTER, GENERAL REPUTATION, PREVIOUS EMPLOYMENT AND SIMILAR BACKGROUND INFORMATION FROM THIRD PARTIES, AND TO CONTACT ANY AND ALL REFERENCES OR PREVIOUS EMPLOYERS I HAVE ON MY APPLICATION. I HEREBY RELEASE ANY RIGHT I MAY HAVE TO LEGAL CLAIMS AGAINST ALL PARTIES AND PERSONS WHO PROVIDE INFORMATION IN RESPONSE TO SUCH REQUESTS FOR INFORMATION. IF EMPLOYED, I RELEASE THE LODGE AT MAUSTON FROM ANY LIABILITY FOR FUTURE REFERENCES IT MAY PROVIDE REGARDING MY WORK HISTORY WITH THE COMPANY.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT IS CONSIDERED TO BE "AT WILL" AND EMPLOYMENT CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION.

THE LODGE AT MAUSTON MAINTAINS A DRUG-FREE WORKPLACE POLICY. IF EMPLOYED AND IF REQUIRED, I AGREE TO SUBMIT TO A MEDICAL EXAMINATION OR DRUG TEST AT ANY TIME BY THE COMPANY AND AS PERMITTED BY LAW. I CONSENT TO SUCH EXAMINATIONS AND TESTS AND I REQUEST THAT THE EXAMINING DOCTOR DISCLOSE TO THE COMPANY INFORMATION OF THE RESULTS OF THE EXAMINATION, WHICH RESULTS SHALL REMAIN CONFIDENTIAL AND SEGREGATED FROM THE PERSONNEL FILE. I UNDERSTAND THAT MY EMPLOYMENT OR CONTINUED EMPLOYMENT, TO THE EXTENT PERMITTED BY LAW, MAY BE CONTINGENT UPON SATISFACTORY MEDICAL EXAMINATIONS AND DRUG TESTS, AND IF I AM HIRED, AS A CONDITION OF MY EMPLOYMENT, I WILL ABIDE BY THE COMPANY'S DRUG AND ALCOHOL POLICY.

DATE

SIGNATURE