## Goulding's Lodge Employment Application

We consider applicants for all positions without regard in race, color, sex, religion, national origin, age, disability, or any other legally protected status.

Positions Applied For	Date of Application		Social Security Number				
Last Name	First Name		Middle Name				
Mailing Address	City	State	Zip Code				
Telephone Number	phone Number Date of Birth		Census Number				
Do you have reliable transportation? You	es No E	Email Address:					
Are you a U.S. Citizen? Yes	No	Are you 18 or olde	er? Yes	No			
If you are currently employed, may we contact your present employer?							
Are you available to work:	Full Time	Part Time					
Are you prevented from being lawfully becoming employed in this country due to Visa or Immigration Status?  Proof of citizenship or immigration status will be requested upon employment							
Have you been arrested of convicted of any felony or driving while under the influence?  Yes No If yes, please explain:							
Applicant's Statement:  I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.							
I understand that neither this document nor any offer of employment from the employer constitute an employment contract.							
I understand that false or misleading information given in my application or interview(s) may result in discharge.							
İ							

Applicant's Signature: \_\_\_

Employment Histor	<b>y</b> – Begin with most r	ecent employer. A	ttach additional p	pages if needed.
Job Title		Dates Employed		Work Performed
		From	То	
				4
Employer	Supervisor	Hourly Rate		
		Starting	Final	
Address				
Telephone Number				
Reason for Leaving				
Job Title		Dates Employed		Work Performed
		From	То	
				4
Employer	Supervisor	Hourly		
		Starting	Final	
Address				
Telephone Number				
Reason for Leaving				
				-
Job Title		Dates Employed		Work Performed
		From	То	
				4
Employer	Supervisor	Hourly Rate Starting Final		-
		Starting	FIIIdi	
Address		4		
Telephone Number				
Reason for Leaving				

Military Service						
Branch of Service		Date of Service				
Duties/Specialized Training						
Education						
City		State				
Degrees or Diplomas						
City		State				
Degrees or Diplomas						
Describe any specialized training, skills, honors received and/or qualifications						
References Address Phone Number						
Ad	aress	Phone Number				
	nors received and	City  Degrees or Dip  City  Degrees or Dip				