



# EAST • WEST RESORTS

## GREAT MOUNTAIN VACATIONS

### APPLICATION FOR EMPLOYMENT

*We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.*

*Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.*

Date \_\_\_\_\_  
 Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_ City State Zip  
 Permanent Address \_\_\_\_\_  
 \_\_\_\_\_ City State Zip  
 E-mail address \_\_\_\_\_ How did you hear about us? \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Position Desired \_\_\_\_\_ FT / PT \_\_\_\_\_  
 Date Available for Work \_\_\_\_\_  
 Salary or \$ per hour desired \_\_\_\_\_ Are you 18 years of age or older? Yes / No

### EDUCATION

High School or GED \_\_\_\_\_  
 \_\_\_\_\_ Name City State  
 College: \_\_\_\_\_  
 \_\_\_\_\_ Name # Years Major Degree  
 Special Training: \_\_\_\_\_  
 \_\_\_\_\_ Name # Years Courses of Study

### WORK-RELATED REFERENCES (PREVIOUS SUPERVISORS/WORK PEERS)

*These references should be persons not related to you that you have known at least one year.*

Name:	Address / Business / Phone	Years Known/Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

### EMPLOYMENT RECORD

List your last three employers, beginning with the most recent.

**MOST RECENT EMPLOYER** Are you currently working for this employer? Yes / No May we contact? Yes / No  
 Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
 Address \_\_\_\_\_ City State Zip  
 Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Position \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 Job Duties: \_\_\_\_\_ Name of Immediate Supervisor: \_\_\_\_\_  
 Salary: \_\_\_\_\_ FT/PT \_\_\_\_\_

### PREVIOUS EMPLOYER

May we contact? Yes / No  
 Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
 Address \_\_\_\_\_ City State Zip  
 Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Position \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 Job Duties: \_\_\_\_\_ Name of Immediate Supervisor: \_\_\_\_\_  
 Salary: \_\_\_\_\_ FT/PT \_\_\_\_\_

**PREVIOUS EMPLOYER**

Company Name \_\_\_\_\_

May we contact? Yes / No

Telephone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_

Position \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Job Duties: \_\_\_\_\_

Name of Immediate Supervisor: \_\_\_\_\_

Salary: \_\_\_\_\_

FT/PT \_\_\_\_\_

**RELATED INFORMATION**

- Have you ever worked for or applied to this company before? Yes / No.
  - Have you ever worked for another East-West Resorts company? Yes / No. If yes, which company and your reason for leaving: \_\_\_\_\_
  - Do you have any relatives currently employed by East West Resorts? Yes / No. If yes, in which department do they work? \_\_\_\_\_
  - Have you ever been bonded? Yes / No Have you ever been refused bond? Yes / No
  - Have you been convicted of a crime? Yes / No. If yes, please explain \_\_\_\_\_  
(Conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.)
  - For Driving Jobs Only: Do you have a valid driver’s license? \_\_\_\_\_ Yes \_\_\_\_\_ No
- | Drivers License # | Class of License | State Licensed In |
|-------------------|------------------|-------------------|
| _____             | _____            | _____             |
- Have you had your driver’s license suspended or revoked in the last 3 years? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, give details: \_\_\_\_\_
  - If hired, can you furnish proof you are eligible to work in the U.S.? \_\_\_\_\_ Yes \_\_\_\_\_ No
  - (Optional) Do you have any special talents or skills that you would like to mention? \_\_\_\_\_

**AFFIDAVIT, CONSENT AND RELEASE  
PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING**

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

**I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.**

I have read, understand, and by my signature consent to these statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This application for employment will remain active for a limited time.  
Ask the organization’s representative for details.