



Holiday Inn

1951 U.S. 41 West, Marquette, Michigan 49855

Telephone (906) 225-1351

www.mqtmi.holidayinn.com

Independently owned and operated by H. J. Larson and Associates, Inc.

Application for Employment

The Michigan Civil Rights Act and/or federal law prohibit discrimination in employment on the basis of religion, race, color, handicap, national origin, age, sex, height, weight, or marital status. The Holiday Inn of Marquette is an equal opportunity employer and does not discriminate on the basis of any of these or any other legally protected category or medical condition.

Personal Information *(Please Print Neatly)*

Name _____
(Last) (First) (Middle)

Address _____
(Street) (City) (State) (Zip)

Telephone _____ Email: _____ Social Security No. _____

Position Desired _____ Date Available _____

Expected Wage _____

Status *(check all appropriate)* Full Time Part Time Temporary or Summer

Minimum number of hours you would work per week _____

Shift(s) willing to work: Days Evenings Nights

Can you work holidays and weekends if necessary? Yes No

Are there any days or hours you cannot

work? Yes No

If yes, please list them and explain _____

Are you 18 years of age or older? Yes No

Are you a citizen of the United States? Yes No

If no, do you have the legal right to work and remain in the United States? Yes No

Visa Type _____

Have you ever been convicted of any criminal violation of law, or are you now under pending investigation or charges of violation of criminal law? Yes No

If yes, please explain: _____

Are you currently employed? Yes No

If yes, may we inquire of your present employer? Yes No

Have you previously worked for the Holiday Inn/Ramada Inn of Marquette? Yes No

If yes, Date _____ Position _____

If the position requires travel or transporting guests, do you have a valid driver's license? Yes No

If yes, please provide drivers license information _____

Number

State

Expiration Date

EDUCATION HISTORY

High School or GED

Name _____

Location _____

(Address)

(City)

(State)

(Zip Code)

Highest grade completed _____

Dates Attended _____

(From)

(To)

Did you graduate? Yes No

Did you receive GED? Yes No

College

Name _____

Location _____

(Address)

(City)

(State)

(Zip Code)

Highest year completed _____

Dates Attended _____

(From)

(To)

Major _____

Minor _____

Did you graduate? Yes No

Degree _____

Trade, Business or Correspondence School

Name _____

Location _____

(Address)

(City)

(State)

(Zip Code)

Highest year completed _____

Dates Attended _____

(From)

(To)

Major _____

Minor _____

Did you graduate? Yes No

Degree _____

Military Service

Were you in the U.S. Armed Forces? Yes No

What Branch? _____ From _____ to _____

Current Draft Status? Active Inactive

Duties

IN CASE OF AN EMERGENCY, NOTIFY:

<i>Name (Relationship)</i>	<i>Address</i>	<i>Telephone No</i>
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EMPLOYMENT HISTORY

(Please list past employment beginning with present or last employer.)

Present or Last Employer _____ Position
Held _____

(Address) (City) (State) (Zip) (Telephone)
Dates of Employment From _____ To _____ May we contact? Yes No
Name of Supervisor _____ Dept. _____ Wage _____ /hr.
Reason for Leaving _____

Previous Employer _____ Position Held _____

(Address) (City) (State) (Zip) (Telephone)
Dates of Employment From _____ To _____ May we contact? Yes No
Name of Supervisor _____ Dept. _____ Wage _____ /hr.
Reason for Leaving _____

Previous Employer _____ Position Held _____

(Address) (City) (State) (Zip) (Telephone)
Dates of Employment From _____ To _____ May we contact? Yes No
Name of Supervisor _____ Dept. _____ Wage _____ /hr.
Reason for Leaving _____

REFERENCES

(Please list three persons who could be contacted as character references other than relatives.)

1. _____

—
Name *Occupation*

—
Address *Telephone*

2. _____

—
Name *Occupation*

—
Address *Telephone*

3. _____

—
Name *Occupation*

—
Address *Telephone*



Policy, Certification and Authorization Statements

Drug-Free Workplace Act

The Holiday Inn of Marquette, in compliance with the Drug-Free Workplace Act of 1988, P.L. 100-690, certifies that we will maintain a drug-free workplace by prohibiting the unlawful manufacture, distribution, dispensing, possession or use of any controlled substance by any employee in the workplace and will enforce strict sanctions, up to and including discharge, for any violation of this policy.

Immigration Reform and Control Act

The Holiday Inn of Marquette is required by law to verify all new employees' eligibility for employment in the United States. A new employee must provide the Holiday Inn of Marquette with documentation of his/her authorization to work and proper identification within the first three business days of employment. Employment will be terminated if appropriate documentation is not submitted. A list of acceptable documents is available in the Accounting Office, 1951 U.S. 41 West, Marquette, Michigan 49855.

Certification/Release

I certify that I have read and understand the above-stated policies and that I will, if offered and if I accept my employment with the Holiday Inn of Marquette, comply with these and all other hotel policies.

I acknowledge and agree that should I, once employed or as an employee, be subsequently arrested or convicted of one or more criminal offenses as listed below:

1. Commit, attempt to commit, or conspiracy to commit a felony;
2. Misdemeanor, including but not limited to assault, battery, criminal sexual conduct or operating a motor vehicle under the influence.

I will notify this employer in writing within twenty-four (24) hours of the event.

I certify that the answers that appear on this application and the information provided in my resume are complete and true. I hereby authorize the Holiday Inn of Marquette and/or its agents to verify any or all of the information provided on this application and in my resume. In order to verify such information, I hereby authorize all persons, schools, companies and law enforcement agencies to release any records or any other information they may possess relating to my application for employment. I also release any individual, partnership or corporation which presently or formerly employed me, any school I attended, their officers, agents and employees and any law enforcement agency from any liability, claims or damages for issuing such information in good faith and without malice.

Should I become an employee at this organization, I also release the Holiday Inn of Marquette from any liability, claims or damages for issuing such information in good faith and without malice to other individuals/institutions who have legitimate and common interest in the subject matter.

I realize that falsification or omissions of any information on this application, in my resume, or during any interview, will be grounds for rejection of my application or if I am offered employment, discharge at any time during my employment. I also understand that nothing in this application is intended to imply or create an employment relationship or contract for employment.

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Signature of Applicant _____ Date _____
(Do Not Print)