

# Employment Application

An Equal Opportunity Employer

**Please Print**

Date \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_

**Present Address**

Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Permanent Address (if different from present address)**

Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Alternate Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Social Security Number \_\_\_\_\_

**Employment Desired**

**Position Applying for:** \_\_\_\_\_

**Are you applying for:**

Regular part-time work ..... Yes No  
 Temporary work, e.g., summer or holiday work..... Yes No

**What days and hours are you available for work?**

**Are you available to work on weekends?** ..... Yes No

**If hired what date can you start work?** ..... \_\_\_\_\_

**Personal Information**

Have you ever applied to or worked for Valet Parking Services before? Yes No

If yes, when? \_\_\_\_\_

**Do you have any friends or relatives working for Valet Parking Services?** ..... Yes No

If yes, state name(s) and relationship:

\_\_\_\_\_  
 Name Relationship

\_\_\_\_\_  
 Name Relationship

<b>If hired, would you have reliable means of transportation to and from work?</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

<b>Are you at least 18 years of age? (If under 18, hire is subject to verification that you are of minimum legal age) .....</b>	<b>Yes</b>	<b>No</b>
---	------------	-----------

<b>If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? .....</b>	<b>Yes</b>	<b>No</b>
---	------------	-----------

<b>Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? .....</b>	<b>Yes</b>	<b>No</b>
--	------------	-----------

**Explain:** \_\_\_\_\_

<b>Are you currently employed? .....</b>	<b>Yes</b>	<b>No</b>
<b>If so, may we contact your current employer? .....</b>	<b>Yes</b>	<b>No</b>

**Education, Training and Experience**

School	Name and address	No. of years completed	Did you Graduate	<b>Yes</b>	<b>No</b>	Degree or Diploma
--------	------------------	------------------------	------------------	------------	-----------	-------------------

High School	Name		<b>Yes</b>	<b>No</b>	
-------------	------	--	------------	-----------	--

School	Address	City	State		Zip
--------	---------	------	-------	--	-----

College/University	Name		<b>Yes</b>	<b>No</b>	
--------------------	------	--	------------	-----------	--

College/University	Address	City	State		Zip
--------------------	---------	------	-------	--	-----

Vocational/Business	Name		<b>Yes</b>	<b>No</b>	
---------------------	------	--	------------	-----------	--

Vocational/Business	Address	City	State		Zip
---------------------	---------	------	-------	--	-----

Do you speak, write or understand any foreign language? ..... Yes No

If yes, which language(s)? \_\_\_\_\_

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at Valet Parking Services? Yes No

If yes explain: \_\_\_\_\_

Can you drive a manual transmission? ..... Yes No

What is your driver's license number? \_\_\_\_\_ State Issued \_\_\_\_\_

Expiration Date \_\_\_\_\_

Has your license/certification ever been revoked or suspended? Yes No

If yes, state reason(s) date of revocation or suspension and date of reinstatement \_\_\_\_\_

**Employment History**

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer \_\_\_\_\_ Telephone No. \_\_\_\_\_

Type of Business \_\_\_\_\_ Your Supervisor's Name \_\_\_\_\_

Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of Employment \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Weekly Pay: \_\_\_\_\_ Start \_\_\_\_\_ Finish \_\_\_\_\_

Your Position and Duties									
--------------------------	--	--	--	--	--	--	--	--	--

May we contact this employer for a reference? .....							<b>Yes</b>	<b>No</b>
---	--	--	--	--	--	--	------------	-----------

**Employment History cont.**

Name of Employer					Telephone No.				
------------------	--	--	--	--	---------------	--	--	--	--

Type of Business					Your Supervisor's Name				
------------------	--	--	--	--	------------------------	--	--	--	--

Address & Street				City		State		Zip	
------------------	--	--	--	------	--	-------	--	-----	--

Dates of Employment		From		To		Weekly Pay:		Start		Finish
---------------------	--	------	--	----	--	-------------	--	-------	--	--------

Your Position and Duties									
--------------------------	--	--	--	--	--	--	--	--	--

May we contact this employer for a reference? .....							<b>Yes</b>	<b>No</b>
---	--	--	--	--	--	--	------------	-----------

Name of Employer					Telephone No.				
------------------	--	--	--	--	---------------	--	--	--	--

Type of Business					Your Supervisor's Name				
------------------	--	--	--	--	------------------------	--	--	--	--

Address & Street				City		State		Zip	
------------------	--	--	--	------	--	-------	--	-----	--

Dates of Employment		From		To		Weekly Pay:		Start		Finish
---------------------	--	------	--	----	--	-------------	--	-------	--	--------

Your Position and Duties									
--------------------------	--	--	--	--	--	--	--	--	--

May we contact this employer for a reference? .....							<b>Yes</b>	<b>No</b>
---	--	--	--	--	--	--	------------	-----------

**Military Services**

<b>Have you ever obtained any special skills or abilities as the result of</b>							<b>Yes</b>	<b>No</b>
--	--	--	--	--	--	--	------------	-----------

service in the military?

If so, describe:

**References**

List below three persons not related to you who have knowledge of your work performance within the last three years.

First Name	Last Name	Telephone No.	
Address & Street	City	State	Zip
Occupation		No. of Years Acquainted	
First Name	Last Name	Telephone No.	
Address & Street	City	State	Zip
Occupation		No. of Years Acquainted	
First Name	Last Name	Telephone No.	
Address & Street	City	State	Zip
Occupation		No. of Years Acquainted	

**Please Read Carefully. Initial Each Paragraph and Sign Below.**

Initials

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, personally completed this application. I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials

I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

Date

Applicant's Signature