



P.O. Box 407  
Springdale, Utah 84767  
E-mail: robin@desertpearl.com

# Employment Application

Today's Date \_\_\_\_\_

Desired Position \_\_\_\_\_

## PERSONAL INFORMATION

---

Applicant's Full Name (Last, First, M.I.) \_\_\_\_\_

Current Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

E-mail Address \_\_\_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Do you own a car?  Yes  No Do you have consistent, reliable transportation?  Yes  No

Do you own or rent your residence? \_\_\_\_\_ How many years have you lived there? \_\_\_\_\_

Driver's License or State I.D. # (please include state abbreviation) \_\_\_\_\_

How were you referred to Desert Pearl Inn? \_\_\_\_\_

Have you ever pled "guilty", "no contest" or been convicted of a felony?  Yes  No If so, what was the felony? \_\_\_\_\_

Are there any outstanding judgments held against you?  Yes  No If so, what are they? \_\_\_\_\_

Are you in good physical health?  Yes  No If no, in what way? \_\_\_\_\_

Do you have any physical limitations?  Yes  No If yes, what are they? \_\_\_\_\_

Are you a smoker?  Yes  No Are you willing to submit to a drug test prior to an offer of employment?  Yes  No

## EMPLOYMENT INFORMATION

---

Are you over 18?  Yes  No

Have you previously worked for Desert Pearl Inn?  Yes  No If yes, when and in what area? \_\_\_\_\_

Date Available to Start \_\_\_\_/\_\_\_\_/\_\_\_\_ Salary Requested \$ \_\_\_\_\_

Are you a citizen of the United States?  Yes  No Are you legally authorized to work in the United States?  Yes  No

Hours:  Part-Time  Full-Time  Seasonal (April-November)

## EDUCATION

Level of Education	Name	State/Country	Did you graduate?	Degree
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	

**EDUCATION** *(continued)*

---

What other experience, skills or languages do you possess that would be relevant to this position? \_\_\_\_\_

What are some of your strengths? \_\_\_\_\_

What are some of your weaknesses? \_\_\_\_\_

**EMPLOYMENT HISTORY** *To be considered for employment, please fill out completely.*

---

**1 LAST EMPLOYER**

Company Name \_\_\_\_\_ Dates of Employment: From \_\_\_ / \_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ / \_\_\_

Starting Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_ Ending Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Company Street Address \_\_\_\_\_

City/State/Zip Code/Country \_\_\_\_\_

Description of Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**2 PREVIOUS EMPLOYER**

Company Name \_\_\_\_\_ Dates of Employment: From \_\_\_ / \_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ / \_\_\_

Starting Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_ Ending Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Company Street Address \_\_\_\_\_

City/State/Zip Code/Country \_\_\_\_\_

Description of Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**3 PREVIOUS EMPLOYER**

Company Name \_\_\_\_\_ Dates of Employment: From \_\_\_ / \_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ / \_\_\_

Starting Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_ Ending Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Company Street Address \_\_\_\_\_

City/State/Zip Code/Country \_\_\_\_\_

Description of Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**REFERENCES** *List two work references and one personal reference.*

---

- 1 Full Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone (    ) \_\_\_\_\_ How long have you known this person? \_\_\_\_\_
- 2 Full Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone (    ) \_\_\_\_\_ How long have you known this person? \_\_\_\_\_
- 3 Full Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone (    ) \_\_\_\_\_ How long have you known this person? \_\_\_\_\_

**EMPLOYMENT APPLICATION DISCLAIMER AND ACKNOWLEDGEMENT**

---

By signing below, I agree that all information provided on this form is true to the best of my knowledge and I authorize Desert Pearl Inn to contact all previous employers and references listed above.

I hereby authorize any person, organization, or company listed on this application to verify all information concerning my previous employment, education, or any other information they may have, personal or otherwise, with regard to any subjects covered by this application and release all such parties from all liability that my result from furnishing such information to Desert Pearl Inn.

In consideration of employment by Desert Pearl Inn, I agree to adhere to the rules and regulations of the company and hereby acknowledge that these rules and regulations may be changed at any time and without any prior notice.

I also acknowledge that any offer or acceptance of employment may be withdrawn at any time, with or without cause, and with or without prior notice.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please submit your completed application (three pages) and a current resumé.**

Scan and e-mail to [robin@desertpearl.com](mailto:robin@desertpearl.com)

**OR**

Fax to 801-883-9089