

## **Employment Application**

P.O. Box 407

Springdale, Utah 84767

E-mail: help @desertpearl.com

E-mail: help @desertpearl.com	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 consister	nt, 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 abbrevi	iation)
How were you referred to Desert Pearl Inn?	
Have you ever pled "guilty", "no contest" or been convicted	d 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 v	vhat way?
Do you have any physical limitations? ☐ Yes ☐ No If ye	s, what are they?
EMPLOYMENT INFORMATION	
Are you over 18? ☐ Yes ☐ No	
Have you previously worked for Desert Pearl Inn? $\ \square$ Yes $\ \square$	□ No If yes, when and in what area?
Date Available to Start/	Salary Requested \$
Are you a citizen of the United States? $\square$ Yes $\square$ No	Are you legally authorized to work in the United States? $\ \square$ Yes $\ \square$ No
Hours: $\square$ Part-Time $\square$ Full-Time $\square$ Seasonal (April-No	ovember)

## **EDUCATION**

Level of Education	Name	State/Country	Did you graduate?	Degree
High School			☐ Yes ☐ No	
College			☐ Yes ☐ No	
Other			☐ Yes ☐ 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 \_\_\_\_\_\_ Dates of Employment: From\_\_\_\_ /\_\_\_ /\_\_\_ to \_\_\_ /\_\_\_ /\_\_\_ Company Name \_\_\_ Starting Job Title \_\_\_\_\_\_ Salary \$ \_\_\_\_\_ Ending Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_ \_\_\_\_\_\_ Phone ( )\_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Company Street Address \_\_\_\_\_ City/State/Zip Code/Country \_\_\_\_\_ Description of Duties \_\_\_\_ Reason for Leaving \_\_\_ 2 PREVIOUS EMPLOYER Company Name \_\_\_\_\_\_ Dates of Employment: From \_\_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ Starting Job Title \_\_\_\_\_\_ Salary \$ \_\_\_\_\_ Ending Job Title \_\_\_\_\_ Salary \$ \_\_\_\_\_ \_\_\_\_\_ Phone ( Supervisor's Name \_\_\_\_ ) \_\_\_\_\_ Company Street Address \_\_\_ City/State/Zip Code/Country \_\_\_\_\_ Description of Duties \_\_\_\_\_ Reason for Leaving \_\_\_\_\_ PREVIOUS EMPLOYER Company Name \_\_\_\_\_ Starting Job Title\_\_\_\_\_\_ Salary \$\_\_\_\_\_ Ending Job Title\_\_\_\_\_ Salary \$\_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Phone ( )\_\_\_\_\_ Company Street Address \_\_\_\_\_

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

Reason for Leaving \_\_\_\_

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?
By signing below, I agree that all information pro Inn to contact all previous employers and refere	ovided on this form is true to the best of my knowledge and I authorize Desert Pearl nces listed above.
Inn to contact all previous employers and refere I hereby authorize any person, organization, or comployment, education, or any other information	nces listed above.  company listed on this application to verify all information concerning my previous in they may have, personal or otherwise, with regard to any subjects covered by this
application and release all such parties from all l	ability that my result from furnishing such information to Desert Pearl Inn.
	Inn, I agree to adhere to the rules and regulations of the company and hereby ay be changed at any time and without any prior notice.
I also acknowledge that any offer or acceptance without prior notice.	of employment may be withdrawn at any time, with or without cause, and with or
Applicant Signature	Date

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

Scan and e-mail to help@desertpearl.com

OR

Fax to 801-883-9089