



The information contained in this web page is confidential and is intended only for the use of current ZMC Hotels management. If the reader of this site is not employed by ZMC Hotels, you are hereby notified that any dissemination, distribution, or copying of this site, or any of its contents, is strictly prohibited.

NAME AND ADDRESS OF EMPLOYER \_\_\_\_\_

POSITION \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

BREIF DECIPTION OF YOUR DUTIES \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

From \_\_\_\_\_  
Month/Year  
To \_\_\_\_\_  
Month/Year

**Ending Salary:**  
\$ \_\_\_\_\_

NAME AND ADDRESS OF EMPLOYER \_\_\_\_\_

POSITION \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

BREIF DECIPTION OF YOUR DUTIES \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

From \_\_\_\_\_  
Month/Year  
To \_\_\_\_\_  
Month/Year

**Ending Salary:**  
\$ \_\_\_\_\_

**REFERENCES:** GIVE NAMES OF TWO PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOW AT LEAST ONE YEAR.

NAME ADDRESS BUSINESS YEARS AQUAINTED

HAVE YOU EVER BEEN INVOLUNTARILY DISCHARGED FROM EMPLOYMENT? YES \_\_\_\_\_ NO \_\_\_\_\_ IF SO, WHEN AND UNDER WHAT CIRCUMSTANCES. \_\_\_\_\_

IF HIRED, CAN YOU PROVIDE DOCUMENTS TO PROVE THAT YOU ARE AUTHORIZED TO WORK IN THE UNITED STATES? YES \_\_\_\_\_ NO \_\_\_\_\_

IS THERE ANY INFORMATION WE WOULD NEED ABOUT YOUR NAME OR THE USE OF ANOTHER NAME FOR US TO BE ABLE TO

CHECK YOUR WORK RECORD? YES \_\_\_\_\_ NO \_\_\_\_\_ PLEASE SPECIFY \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF ANY CRIMES, EXCLUDING MINOR TRAFFIC VIOLATIONS? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, LIST NATURE, DATE AND PLACE. \_\_\_\_\_

IN CASE OF AN EMERGENCY NOTIFY:

NAME ADDRESS PHONE NUMBER

I certify that the facts contained in this application are true and complete to the best of my knowledge and understanding that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed herein to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

\*\*\*\*\*  
\*\*

**DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_

HIRED YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES, POSITION \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

SALARY/WAGE \_\_\_\_\_ DATE REPORTING TO WORK \_\_\_\_\_

APPROVED \_\_\_\_\_

EMPLOYMENT MANAGER

DEPARTMENT HEAD

GENERAL

