

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

It is our policy to comply with all applicable laws of the Territory of Guam and Federal Laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other legally protected status.

Date of Application: _____ **Position(s) Applying For:** _____

Are You Applying For:

Temporary Work?	<input type="checkbox"/> Yes or <input type="checkbox"/> No
Regular Full Time Work?	<input type="checkbox"/> Yes or <input type="checkbox"/> No
Regular Part Time Work?	<input type="checkbox"/> Yes or <input type="checkbox"/> No

APPLICANT INFORMATION

LAST NAME	FIRST	MI
Mailing Address	City	State
Zip Code		
Contact No(s) Residence / Work / Mobile or Other		
Can you provide proof – if hired, that you are eligible to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Are you over 18 years of age? <input type="checkbox"/> YES <input type="checkbox"/> NO		
How did you hear of our company? _____		
Do any of your relatives or friends work here? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, please list the names and how you are related: _____		

EDUCATION AND/OR TRAINING

	NAME AND LOCATION	Diploma or Degree	Major Subjects of Study
High School:			
College or University:			
Specialized Training, Trade School, etc.:			
Other Education:			

License or Certification	State Issued	Profession	Lic./Cert. Number	Expiration Date

EMPLOYMENT HISTORY

1. Start with your current or last job – include Armed Forces service and Self-employment
2. Any change or job title under the same employer should be considered a separate position.

Name of Employer:	Company Address		Company Tel. No.
Dates Employed:			
From:	To:	Title/Role	
Salary:	Reason for Leaving:		
Duties:			

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1. I certify that all information contained in this application and any attachments is true and complete to the best of my knowledge. I understand that any willful misrepresentation, false statement, or omission by me in the application or interview process will be cause for rejection of my application or termination of my employment. I authorize investigation of all statements made on this application and any attachments, and I release all persons, companies, and organizations from liability for providing or receiving such information. I further understand that this employment application and other employment related documents are not contracts of employment; and that any oral or written statements to the contrary are hereby expressly disavowed.
2. I understand that as a condition of employment, I will be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, I may be required to submit to an alcohol or drug screening at any time at the discretion of Guam Reef Hotel, Inc. I hereby give consent to having the results of any such alcohol or drug screening I will be required to undergo; to be disclosed to Guam Reef Hotel.
3. I understand that if I am employed, such employment is for no definite period of time unless specified in writing, and that Guam Reef Hotel can change wages, benefits and conditions at any time. I further understand that this is an application for employment and that no employment contract is being offered. I understand that employment at Guam Reef Hotel is "at-will" which means that either I or Guam Reef Hotel can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statutes.
4. The nature of our operations at Guam Reef Hotel may make the following conditions mandatory: Overtime, Shift Work, a rotating work schedule, or work schedule other than Monday through Friday. I understand and accept these conditions of my continuing employment.

Applicant Name

Applicant Signature

Date



To: _____ Attn: Human Resources
Company Name

The following individual is currently being considered for a position with the Guam Reef Hotel. He/She has listed you as former employer, and has authorized us to conduct a reference check. We need your assistance in verifying and providing information below.

Fax number for responses: (671) 646-8481.

Name: _____ Position Title: _____

Dates of Employment: From: _____ To: _____

Salary verified as: _____

Reason for Leaving: _____

Eligible for rehire? _____ Yes _____ No
(If No, please explain)

Name / Signature of Individual providing the information:

Name: Title

Signature Date

I hereby authorize Guam Reef Hotel to conduct a reference check or investigation of all statements contained on my application. The facts set forth in my application are true and complete. I understand that false statements or omissions on the application will null or void the employment consideration.

Applicant Name

Date

Applicant Signature