



# Employment Application

3211 56<sup>th</sup> St NW  
 Gig Harbor WA 98335  
 253.828.1111  
 Fax: 253.851.5402

APPLICANT INFORMATION					
Last Name		First		Middle Name	
Street Address				Apt/Unit #	
City		State		Zip	
Phone			E-mail Address		
Date Available		Social Security #		Desired Salary	\$
Position(s)			Birth Month & Day <b>DO NOT PUT YEAR</b>		
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

EDUCATION					
High School			Address		
From		To		Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
College			Address		
From		To		Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Other			Address		
From		To		Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

PREVIOUS EMPLOYMENT			
Company			Phone
Address			Supervisor
Job Title			Starting Salary \$ Ending Salary \$
Responsibilities			
From		To	May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>
Reason for Leaving			
Company			Phone
Address			Supervisor
Job Title			Starting Salary \$ Ending Salary \$
Responsibilities			
From		To	May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>
Reason for Leaving			

Company		Phone	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Reason for Leaving			

### REFERENCES

Please list three professional references.

Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

### MILITARY SERVICE

Branch	From	To
Rank	Type of Discharge	
If other than honorable, explain		

### DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. By signing this application, I hereby authorize **The INN at Gig Harbor to investigate my background and qualifications for the purposes of evaluating whether I am qualified for the position for which I am applying.** I understand that false or misleading information in my application or interview may result in my termination.

Signature	Date
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