

COMFORT INN & QUALITY INN Equal Opportunity Employers EMPLOYMENT APPLICATION



It is the policy of this company to provide equal opportunity for all qualified persons and not to discriminate against any employee or applicant for employment because of age, race, creed, color, sex, or national origin.

Please print and make sure your answers are legible and that the application is completed in full.

	PERSON	AL INFORMA			
Name					Date
Last	Fin	st	Middle		
Current Address					
Street	City		State		How long?
Previous Address Street	City		State		How long?
	-			_	
Please list all other states and counties y	ou nave live	ed in over the	last 5 years	5	
Phone Cell Phone (if different)					
Social Security Number E-Mail					
Have you ever applied or been employed	d by this cor	npany?		🗆 Yes	□ No
If yes, when? Where	e?		Supervi	sor's Nam	ie
Are any of your relatives currently emplo	yed by this	company?		🗆 Yes	🗖 No
If yes, list name(s) and relationship(s) to				-	-
If hired, can you provide proof that you are e	-			Yes	□ No
	-		States		
Are you at least 18 years old?	Yes	No No			
If not, do you have a work permit?	🗖 Yes	🗖 No			
Have you ever been convicted of a crime?	🗅 Yes	🗖 No			
If yes, give date, place, and nature of crime. (Convictions will not necessarily disqualify applicant; each case is considered individually.)					
	EMPLO	YMENT DESI	RED		
Position applying for: Wage/Salary Desired: Date available:					
Applying for: 🔲 Part-time 🔲 Full-time If part-time, how many hours per week					
If applicable to desired position, please complete the information in this box.					
Are you willing to work overtime as required?					
Nights ? 🖸 Yes 📮 No 👘 Weekends ? 🖵 Yes 📮 No Holidays ? 🖵 Yes 📮 No					
If hired would you be willing to commit to work with us for at least 9 months?					

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EDUCATION								
*Please omit any information that would disclose race, age, ethnic origin, handicap status, or sexual, religious, or political persuasion.								
	Name, City, State of School C		Course/Majo	rse/Major (Please i		ny Diploma or Degree completed ease indicate if you are currently attending school.)		
High School								
College or								
University								
Other (Specify)								
If currently	If currently attending school, what are the days and times of your scheduled classes?							
School acti	School activities (athletics, student government, offices, committees, etc.)							
	SKILLS AND MEMBERSHIPS							
Software y	Software you use:							
Job Related Skills You Have:								
If job related, indicate the kinds of work which you have done:								
Typing: wpm								
Computers: Other:								
Why do you want this job?								
REFEREN	REFERENCES (Give the name of 3 persons not related to you, whom you have known at least one year.)							
	Name	Address	Address and Phone Number			Business	Years Aquainted	
	HOW WERE YOU REFERRED TO US?							
<u> </u>	Employee:				State or Lo	cal Agency:		
	Name:				Specify:			
	Internet		🖵 Newspaper			Ad:		
	Name:				Specify:			
	Employment Agency:				Other:			
	Specify:				Specify:			
in case of e	emergency, notify:	Name			Relationship t	o you		
	Address		Home Phone			Business Phone		

Please note: If you were known by another name at a previous place of employment, please							
state the other name and date of use.							
WORK EXPERIENCE							
Name and Address of present	From	То	Starting	Ending	Reason for	Supervisor	
or last employer	Mo/yr	Mo/Yr	Wage	Wage	Leaving		
	Describe the	work vou did (Title).			I	
	Describe the work you did (Title):						
	1						
Telephone	<u> </u>			<u> </u>		- I.a	
Name and Address of present	From	То	Starting	Ending	Reason for	Supervisor	
or last employer	Mo/yr	Mo/Yr	Wage	Wage	Leaving		
	Describe the	work you did (Title):				
		•	,				
	7						
			Ot atian	E dia a			
Name and Address of employer	From	То	Starting	Ending	Reason for	Supervisor	
prior to that	Mo/yr	Mo/Yr	Wage	Wage	Leaving		
	Describe the work you did (Title):						
	7						
Telephone	<u> </u>			<u> </u>	- (
Name and Address of employer	From	То	Starting	Ending	Reason for	Supervisor	
prior to that	Mo/yr	Mo/Yr	Wage	Wage	Leaving		
	Describe the	work you did (Title):				
		•	,				
	7						
Telephone							
hereby sive permission to cont	aat tha ample	ware listed	ahava conor	sring my priv	ar work ovporionco		
I hereby give permission to contact the employers listed above concering my prior work experience.							
Signed							
If there is a particular employer(s) you do not wish to contact, please indicate which one(s):							

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OTHER INFORMA	TION					
If you have dependent children, has child care been arranged?	🗖 Yes	🖵 No				
Do you have reliable transportation?	🗖 Yes	🖵 No				
Do you use tobacco?	🗖 Yes	🖵 No				
Do you drink alcoholic beverages?	Yes	🗖 No				
Do you use narcotics or any other illegal drugs?	🗅 Yes	🗖 No				
Have you ever been convicted of a crime?	🗅 Yes	🗖 No				
Are you seeking full time or part-time employment?						
How many days per week would you like to work?						
Are there any days that you cannot work? If yes, explain:	🗋 Yes	D No				
Please indicate your reason for applying for employment. 1. Wish to change employment 2. Have experience in the lodging industry. 3. Unemployed 4. Other Please explain answer:						
	Tes Yes	D No				
Front Desk Positions: Check all shifts you and willing to work and indicate shift preference (1, 2, 3)						
7:00 a.m 3:00 p.m3:00 p.m 11:00 p.m11:00 p.m 7:00 a.m.						
Housekeeping Positions: Do you have any back or knee injuries that will hinder your ability to perform						
typical housekeeping duties?	pical housekeeping duties?					
ate: Signature:						

Certification of Agreement

I certify that all information on this application is true and correct. I also certify that I have accounted for all of my work experience and training on this application. It is my understanding that Quality Inn & Suites may make a thorough investigation of my entire work and personal history and may verify all data given in my application for employment, realted papers or oral interviews. I authorize such investigation and the giving and receiving of any information requested Quality Inn & Suites and I release from liability any person giving or receiving

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