

Employment Application

Orleans Waterfront Inn, Inc.

3 Old County Rd. PO Box 188 Orleans, Ma 02653 Ph#(508)255-2222 Fax(508)255-6722 OrleansInn.com

Est.	1875									
			Applica	nt Inform	ation					
Full Name: Address:	Last Street Address		First			M.I.	Date: _			
Phone: (_ Date Availab	City	Social Secu	rity No.: _	-mail Addı		State Desired Salage of 18?	ary: \$	ZIP Code		
Are you a cit	tizen of the United S ver worked for this cover been convicted o	tates? ompany?	YES NO YES NO YES NO	If no, a	re you aut	thorized to wor	rk in the U.S	S.?	ES .	NO
	Have you ever	filed an unemp		im? Yes	No If	yes, explain:_				
High School: From: College:	To:	Did	Addre: you graduat Addre:	ss: YES	NO	Degree: _				
From:	To:		you graduat	YES	NO	Degree: _			·	

References						
Please list two professional references.						
Full Name:	Relationship: _					
Company:		Phone:	()			
Address:	_					
Full Name:	Relationship: _					
Company:		Phone:	()			
Address:	_					

Previous Employment						
Company:	Phone: ()					
Address:	Supervisor:					
Job Title: Starting Salary:	\$ Ending Salary: \$					
Responsibilities:						
-						
May we contact your previous supervisor for a reference?	NO					
Company:	Phone: ()					
Address:	Supervisor:					
Job Title: Starting Salary:	\$ Ending Salary: \$					
Responsibilities:						
From: To: Reason for Leaving:						
May we contact your previous supervisor for a reference?	NO					
Company:	Phone: ()					
Address:	Supervisor:					
Job Title: Starting Salary:	\$ Ending Salary: \$					
Responsibilities:						
From: To: Reason for Leaving:						
May we contact your previous supervisor for a reference?	NO					
Availability						
Please mark shifts you are unable to work. am am am am am am am am pm Sun Mon Tue Wed Thu Fri Sat						
Are you available holidays? On what date must you leave? _						
Disclaimer and Signature						
I certify that my answers are true and complete to the best of my knowledge.						
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
Signature:	Date:					