

EMPLOYMENT APPLICATION

Save form with code: EA (your name) and email as attachment to: szeis@hyatts.com

Office Use	
Date Taken	_____
Taken at Store	_____
Taken By	_____

IMPORTANT: Please print plainly if faxed and answer all questions completely. Attach resume if available. Applications will remain active for 1 year from date submitted.

Name _____ Date _____

Present address _____ Phone # _____
Street City/State Zip

Are you legally eligible to work in U.S.A.? _____ Are you legal age to work? _____

Do you possess a current valid drivers license? _____ State of issue _____

Drivers license # _____

Social Security # _____

Position applied for _____ Date available _____

Have you worked for us before _____ If so, where & when _____

Do you know anyone that works for Hyatt's, if so, who? _____

Check ALL locations you would like to be considered for employment at:

Buffalo Clarence

EDUCATION				
	Name & Address of School	Concentration or Major	Circle last year completed	Degree or Diploma
Elementary			5 6 7 8	
High School			1 2 3 4	
College			1 2 3 4	
Other			1 2 3 4	

Do you intend to return to school? _____

If so, Where & When _____

List any skills, experience, memberships, etc. that you would like us to consider. _____

EMPLOYMENT

List Present & Past Employers. Start with most recent.

1	Company Name _____ Address _____ Supervisor _____ Job Title & Description _____ _____	Phone _____ Date: Start _____ Finish _____ Pay: Start _____ Last _____ Reason for Leaving _____ _____
2	Company Name _____ Address _____ Supervisor _____ Job Title & Description _____ _____	Phone _____ Date: Start _____ Finish _____ Pay: Start _____ Last _____ Reason for Leaving _____ _____
3	Company Name _____ Address _____ Supervisor _____ Job Title & Description _____ _____	Phone _____ Date: Start _____ Finish _____ Pay: Start _____ Last _____ Reason for Leaving _____ _____

List names of employer's above that you do NOT want us to contact and explain why. _____

AVAILABILITY

List the times you would be available during our hours of operation.

Monday 8am-9 ³⁰ pm	Tuesday 8am-9 ³⁰ pm	Wednesday 8am-9 ³⁰ pm	Thursday 8am-9 ³⁰ pm	Friday 8am-9 ³⁰ pm	Saturday 9am-9 ³⁰ pm	Sunday 11am-6pm

Please List any future changes to your schedule or upcoming events that would effect your hours of availability? _____

Please Read and Sign

I affirm that all statements contained in this application are true. I understand that any false statements made may constitute grounds for disqualification or future termination in the event of employment. _____

Manager Comments: _____

