FOR OFFICE USE ONLY Position	the hotel		ðok	For	Em]	ntion ploym ain active for 60 o		
SIGNATURE OF HIRING MANAGER						Date		
EMPLOYMENT WILL ALSO BE E	BASED ON THE ABILI	TY TO PASS A	DRUG TES	ST, EXCI	LUDING	MARIJUAN	۹.	
Do you have a Social Security number?		bb Choice	2nd Job	Choice	/	3rd Job Choid	ce	
Last Name	First Name		Initia	ıl		Telephone	Number	
Number Street	City		State	Zip		Message	e Phone	
Date Available for Work	_ Full Time 🗆 Part	Time 🗆 Tempo	orary 🗆 🛛 P	erm 🗆	Days 🗆	Nights 🗆	Shifts 🗆	
NOTE: NO QUESTIONS ON TH EMPLOYER AND WILL F								
Are you 21 years of age or older? If no, Date of Birth								
Are you certified in Alcohol Management in the State of Alaska? If yes, Expiration Date								
Are you certified in Sanitation Management?		If yes	, Expiration D	Date				
If not a U.S. citizen, do you have a valid work	a permit?(F	Proof will be reque	ested if hired	.)				
Have you ever worked for the Hotel Captain	Cook or Hickel Investmen	t Company?	If y	es, when?	·			
What position?								
List any relatives currently employed with the	Hotel Captain Cook/Hick	el Investment, and	d state relatio	onship:				
	you graduate? you graduate?		Name and	d Address	s of High	School		
Name(s) and Address(es) of College(s) (1) (2)								
(3) Majors			arned					
Describe any other training or education:								
Equipment or office machines you can opera Typing speed (wpm): Special skills: Languages spoken: Current certificate of First Aid Training or CPI								
MILITARY SERVICE From:	ranch		_Duty/Traini	ng				

EMPLOYMENT HISTORY

PLEASE READ CAREFULLY – WRITE CLEARLY – ANSWER ALL QUESTIONS

Starting with present or most recent, list ALL previous employers regardless of type of position or length of time on job. If employed by any of the following companies under another name, please indicate in the space provided. If you need more space to complete employment history, please continue on the back page.

	MOST RECENT COMPANY NAME			TELEPHONE
				()-
	STREET CITY	STATE	ZIP	EMPLOYED (MONTH AND YEAR)
				FROM TO
	NAME OF SUPERVISOR	POSITION YOU HELD		RATE OF PAY
1				STARTING ENDING
· ·	DESCRIBE YOUR JOB DUTIES			REASON FOR LEAVING
				-
				YOUR NAME WHEN YOU WORKED THERE:
	COMPANY NAME			TELEPHONE
				()-
	STREET CITY	STATE	ZIP	EMPLOYED (MONTH AND YEAR)
				FROM TO
	NAME OF SUPERVISOR	POSITION YOU HELD		RATE OF PAY
2				STARTING ENDING
	DESCRIBE YOUR JOB DUTIES	1		REASON FOR LEAVING
				-
				YOUR NAME WHEN YOU WORKED THERE:
	COMPANY NAME			TELEPHONE
				()-
	STREET CITY	STATE	ZIP	EMPLOYED (MONTH AND YEAR)
				FROM TO
	NAME OF SUPERVISOR	POSITION YOU HELD		RATE OF PAY
3				STARTING ENDING
	DESCRIBE YOUR JOB DUTIES	·		REASON FOR LEAVING
				1
				YOUR NAME WHEN YOU WORKED THERE:
	COMPANY NAME			TELEPHONE
	STREET CITY	STATE	ZIP	() - EMPLOYED (MONTH AND YEAR)
	STREET	SIAIE	ZIF	FROM TO
	NAME OF SUPERVISOR	POSITION YOU HELD		RATE OF PAY
4				STARTING ENDING
	DESCRIBE YOUR JOB DUTIES			REASON FOR LEAVING
				-
				YOUR NAME WHEN YOU WORKED THERE:
				TOUR NAME WIEN TOU WORKED THERE.
	COMPANY NAME			TELEPHONE
				()-
	STREET CITY	STATE	ZIP	EMPLOYED (MONTH AND YEAR)
				FROM TO
	NAME OF SUPERVISOR	POSITION YOU HELD		RATE OF PAY
5				STARTING ENDING
	DESCRIBE YOUR JOB DUTIES	1		REASON FOR LEAVING
				1
				YOUR NAME WHEN YOU WORKED THERE:
				1

GENERAL INFORMATION

Do you understand the require (If no, the interviewer will prov	ements of the job(s) you are applying for? Yes ide a position description.)	No					
If you have ever been discharged or asked to resign from any position, please explain:							
	l of a felony within the last 7 years? Yes y disqualify applicant from employment.)	No					
If yes, please explain:							
Please include any other relevant information that would be helpful in considering you for employment. For example: volunteer work, accomplishments, etc.							
PERSONAL REFERENCES (Do	o not include relatives or former employers.)						
Name	Address						
Telephone	Occupation	Have known how long?					
	Address						
Telephone	Occupation	Have known how long?					

Applicant's Statement

PLEASE READ BEFORE SIGNING. If you have any questions regarding this statement, please ask the interviewer before signing.

I personally have completed this application. All of the information I have provided is true and correct to the best of my knowledge. I understand that misrepresentation or omission of facts is cause for separation if employed.

I authorize any present or prior employer, academic, technical, or vocational school, physician or hospital, public service, or any other person to release to The Hotel Captain Cook or Hickel Investment Company information regarding my employment and security record, character, and ability to perform to the Quality Assurance Standards and Safety Policy. They also may give me the information if I request it in writing within a reasonable time. I will release all persons from liability with regards to supplying this data.

Submitting this application does not imply I will be interviewed or employed. No supervisor or manager has the authority to make any guarantees about any term or condition of employment. The application will become inactive after sixty (60) days. If I wish to reapply, a new application must be completed.

I further agree that if hired, employment will be at will of the company and myself, and may be terminated by either party without cause or notice.

I have read, or had this statement read to me. I understand and agree to its complete contents.