



HOTEL DUVAL  
APPLICATION FOR EMPLOYMENT

**PERSONAL INFORMATION**

DATE OF APPLICATION: \_\_\_\_\_

Name:

.....  
Last

.....  
First

.....  
Middle

Address:

.....  
Street

.....  
(Apt)

.....  
City, State

.....  
Zip

Alternate Address:

.....  
Street

.....  
City, State

.....  
Zip

Contact Information:

( )

( )

.....  
Home Telephone

.....  
Mobile

.....  
Email

Do you have the legal authorization to work in the United States? **Yes** \_\_\_ **No** \_\_\_ Proof of documentation will be required upon hire.

Have you ever been convicted of, pled nolo contendere to, been placed on probation for, or had adjudication withheld for the commission of a crime? (Answering "yes" will not automatically disqualify you from employment). **Yes** \_\_\_ **No** \_\_\_

If yes, please describe in full: \_\_\_\_\_

Are you currently employed? **Yes** \_\_\_ **No** \_\_\_ Available Start Date \_\_\_\_\_

Desired Position \_\_\_\_\_

**EDUCATION**

	Name and Location	Graduate? – Degree?	Major / Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc...			
Other Education			

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.

.....  
.....  
.....

**PREVIOUS EXPERIENCE**

Please list beginning from most recent

Dates Employed	Company Name	Location	Role/Title

**Job notes, tasks performed and reason for leaving:**

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.....

.....

Dates Employed	Company Name	Location	Role/Title

**Job notes, tasks performed and reason for leaving:**

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.....

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Dates Employed	Company Name	Location	Role/Title

**Job notes, tasks performed and reason for leaving:**

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**PLEASE READ THE FOLLOWING AND SIGN YOUR NAME BELOW**

I understand that employment is for no definite duration. Employment with the Company at all times is at-will, and either the Company or I may terminate the employment relationship at any time, with or without notice.

I declare my answers to the questions on this application are true and complete, and I give this Company the right to investigate all references and information given. I agree that any false statements, misrepresentations or omissions of information on this application will be cause for refusal to hire or for immediate dismissal.

I agree that I have the responsibility as long as I am employed by Duval Partners, LLC to advise the Company of any changes in the information on my application.

If requested by the management at any time, while on Company property, I agree to submit to a search of my person and belongings or of any locker that may be assigned to me, and I hereby waive all claims for damages on account of such examinations.

I understand that any offer of employment is contingent upon the following: 1) satisfactory completion of a drug screen paid for by the company and conducted by a doctor or medical facility selected by the Company; and 2) satisfactory results of a criminal background check, social security tracing, and driving record check, if applicable; and corporate approval.

Furthermore, I hereby knowingly and voluntarily release the Company from any possible claims, or causes of action based upon the administration of pre-employment screening and the Company's reliance upon the results of any such test and inquiry.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

AN EQUAL OPPORTUNITY EMPLOYER – A DRUGFREE WORKPLACE

**PLEASE RETURN VIA FAX OR EMAIL TO:**

**850.222.0335 (Attn: Hotel Duval Employment) / EMPLOYMENT@HOTELDUVAL.COM**