

Pinecrest Lake Resort
PO Box 1216
Pinecrest, CA 95364
(209)965-3411
(209)965-4032 Fax

Application for Employment

PERSONAL INFORMATION:

Date: _____ Social Security Number: _____

Name (Last, First, Middle): _____

Physical Address: _____ City _____ State _____ Zip Code _____

Mailing Address: _____ City _____ State _____ Zip Code _____

Home Phone:() _____ Cell Phone:() _____

EMPLOYMENT DESIRED

Position Desired: _____ Salary Desired: _____

Date You Are Available to Start Work: _____ Currently Employed? YES NO

May We Contact Your Present Employer? YES NO Applied With Company Prior? YES NO

Are You Legally Authorized to Work in the United States? YES NO

EDUCATION HISTORY

	<i>Name and Location of School</i>	<i>Years Attended</i>	<i>Did you Graduate?</i>
High School	_____	_____	_____
College	_____	_____	_____
Trade, Business	_____	_____	_____

FORMER EMPLOYERS (Please list your last four employers, starting with the most recent one first.)

<i>Date (Month and Year)</i>	<i>Name and Address of Employer</i>	<i>Position</i>	<i>Salary</i>	<i>Reason for Leaving</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

REFERNECES (Please list the names of at least three people, not related to you, whom you have known at least one year.

<i>Name</i>	<i>Phone Number</i>	<i>Business</i>	<i>Years Known</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

GENERAL INFORMATION

Subjects of Special Study/Research

Work: _____

Special
Training: _____

Special
Skills: _____

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Pinecrest Lake Resort from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of Pinecrest Lake Resort has any authority to enter into any agreement for employment for any specified period of time, or to may any agreement contrary to the foregoing, unless it is in writing and signed by an authorized Pinecrest Lake Resort representative.

This waiver does not permit the release or use of disability related or medical indormation ina manner prohibited b the American with Disabilities Act (ADA) and other relevant federal and state laws.

Signature of Applicant: _____ *Date:* _____