



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATIO	N Com	plete a	all applicable is	nformation										
Name (Full - Last, First, M.	I)													
Position(s) applied for:					Are you willing to work: Full Time Part Time Temporary									
					☐ Weekends ☐ Evenings ☐ Nights									
Street Address:						City:			State:			Zip:		
Mobile Phone: Email:			ail:			Have you previously been employed by our company?								
Email Address:						Yes No Where Are you over				er 18 years of age?				_
Are you legally authorized to work in the United States? Yes No					When could you start employment?									
Have you ever applied for employment with our company?					How did you learn about us?									
Yes No When? Where?					now did you ream about us.									
EMPLOYMENT HISTORY	(List belo	w last			h th	ie most recei	ıt one fi	irst)						
Present or Last Position:	Present or Last Position:			Name of Company:			Fı			From Mo/Yr:		To Mo/Yr:		
Street Address:					City:		Sta		Sta	State:		Zip:		
Duties:					1	Reason for	r Leavin	ıg:						
Starting Annual Salary: Final Annual Salary:			Salary:	Bonus: Co			Comm					May we contact your supervisor?		
Name of Supervisor: Title and De				Title and Depa	artm	rtment of Supervisor: Phone Number of Supervisor					pervisor"			
Next Previous Position:			Name of Company:						From Mo/Yr:			To Mo/Yr:		
Street Address:				City:				State:		te:		Zip:		
Duties:					•	Reason for	r Leavin	ng:		·				
Starting Annual Salary: Final Annual Sala			Annual Salary	y: Bonus:				Commission:						
Name of Supervisor:			Title and Department of Supervisor:				Phone Number of Supervisor:							
Next Previous Position: Name of Co			ompany:			From Mo/Y		/Yr:	Yr:		To Mo/Yr:			
Street Address:				City:			State:		te:		Zip:			
Duties:						Reason for	r Leavin	ng:		•			•	
Starting Annual Salary: Final Annual Salary			Bonus:			Commission:								
Name of Supervisor:			Title and Department of Supervisor:					Phone Number of Supervisor:						

EDUCATION INFORMATION

High School or GED:	Address:	City:	State:	Degree:	Subjects S	Studied:
College:	Address:	City:	State:	Degree:	Major:	GPA:
College:	Address:	City:	State:	Degree:	Major:	GPA:
Graduate School:	Address:	City:	State:	Degree:	Major:	GPA:
Other:	Address:	City:	State:	Degree:	Major:	GPA:

GENERAL.

UENEKAL								
Please list any certifications (period), skills, specialized tra					ense/certification and the validity			
Please provide 3 Profession	al References:							
Name:	Occupation: How Known			Telephone Number:	Email:			
In what computer softwar	re programs are you p	proficient?						
Have you ever been convicted		Do you currently have a valid driver's license? ☐ Yes ☐ No						
☐ Yes ☐ No If Yes, please provide dates a		Driver License State and Number: Have you ever been denied a license, permit or privilege to operate a motor vehicle? ☐ Yes ☐ No If yes, please provide additional information:						
			l					

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

Special Notes:

In consideration of my employment, I agree to conform to the policies and procedures of the company. I understand that in accepting this application, the company is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause, and with or without notice at any time. I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or, if I am hired, in my employment being terminated. I agree to allow Hurst Harbor Marina to conduct all necessary background checks include but not limited to references, criminal background and driving record. I also understand that any offer of employment is conditioned on the completion of pre-employment tests and documentation. I will, upon request, sign all necessary consent forms. Date: Signature: For Office Use Only: Hiring Manager: Expected Start Date: _____