VENDUE INN ASSOCIATES, LLC AT-WILL EMPLOYMENT APPLICATION

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT, but merely is intended to evaluate suitability for employment. It is the policy of the company to provide equal employment to all qualified persons without discrimination on the basis of gender, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under state and federal law. It is also the policy of the company to have the option of conducting pre-employment screening before a job offer is made. If a job offer is made, employment may be contingent upon a successful completion of a medical examination, which may include providing body substance samples. This application will remain active for 180 days.

PLEASE PRINT ALL INFORMATION- EXCEPT YOUR SIGNATURE

PERSONAL INFORMATION			
NAME	PHONE #		
ADDRESS		CITY	
STATE	ZIP	SOCIAL SECURITY#_	
I AM APPLYING FOR THE POSITION ()F		
I CAN START WORK ON (date) I CAN WORK (Check items that apply)		PART TIME	
WEEK-DAYS	WEEKENDS		
Please list your previous two addresses a	nd the dates you lived there:		
Street		City/State/Zip	
From		Until	
Street		City/State/Zip	
From		Until	
EMPLOYMENT HISTORY Please list your last three (3) employers be	eginning with the most recent:		
Company Name	Address	S	
City/State		one	
Job Held			
Date From/To	Supervi	isor	
Company Name	Addres	s	
City/State		one	
Job Held			
Date From/To		isor	
Company Name	Addres	s	
City/State		one	
Job Held			
Date From/To		isor	
M	N		
May we contact your current employer? Ye	es No		
Please answer the following questions. When necessary, note the question numb	per and use a sheet of paper to	provide explanation:	
1) Are you at least 18 years of age and lega	ally eligible for work in the Unit	ed States Yes	No
2)Have you ever been convicted of or pled	e? Yes	No	
3) Are you on layoff and subject to recall?	Yes	No	
4) Have you ever been discharged or asked	Yes	No	
5) Are you currently bound by a non-comp	t? Yes	No	
6)Have you been made aware of the basic j		Yes	No
7)Do you understand the job requirements?		Yes	No
8) Will you be able to work overtime when	Yes	No	

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EDUC A	<u>ATION</u>
HIGH SO	CHOOL ATTENDED
	ONDATES
RECEIV	ED DIPLOMA/ CERTIFICATE YESNO
UNDER	GRADUATE COLLEGE ATTENDED
LOCATI	ONDATES
RECEIV	ED DIPLOMA/CERTIFICATE YESNO
GRADU	ATE SCHOOL ATTENDED
	ONDATES
RECEIV	ED DIPLOMA/CERTIFICATE YESNO
	BUSINESS OR OTHER SCHOOL ATTENDED
LOCATI	ONDATES
RECEIV	ED DIPLOMA/CERTIFICATE YESNO
JOB RE	LATED SKILLS
USE TH	IS SPACE TO LIST ANY SPECIAL SKILLS YOU HAVE THAT RELATE TO THE POSITION
	NY PROFESSIONAL LICENCES, DESIGNATIONS, CERTIFICATIONS THAT MAY RELATE TO THE POSITION DE THE NAME OF ORGANIZATION, DATE GRANTED, AND OTHER RELEVANT INFORMATION:
3.	
If the pos	sition will require driving a motor vehicle, answer the following questions:
Valid Dr	ivers License Number Issued by the State of
Have you	n been convicted of or pled guilty to any traffic-related offense within the past five years? But drivers license been suspended or revoked or your driving privileges modified by a court of law?
List all st	ates from which you hold or have held a driver's license
APPL1	CANTS CERTIFICATION AGREEMENT I authorize the investigation of all statements contained in this application and release from all liability any persons or employers Supplying such information, and I also release the company from all liability which might result from making the investigation
2.	I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of facts on this application (or on any required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.
3.	I agree if I am offered and accept a position, to conform to all existing and future company rules and regulations and I understand that the company reserves the right to change wages, hours and working conditions as deemed necessary. I also understand that, if hired, my employment will be at-will, meaning that either party can end the employment relationship at any time and for any or no reason.
4.	I understand that any employment offer is contingent upon my providing within three (3) working days of employment, valid proof of Identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986
5.	I have read and reviewed the information provided in this application and the above statements. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.
Date:	Signature: