

HOSPITALITY INTERNATIONAL

Employment Application



APPLICANT INFORMATION												
Last Name			First			M.I.		Date				
Street Address						Apartment/Unit #						
City				State				ZIP				
Phone				E-mail Address								
Date Available			Social Security No.			Desired Salary						
Position Applied for												
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain					
EDUCATION												
High School				Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree		
College				Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree		
Other				Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree		
REFERENCES												
<i>Please list three professional references.</i>												
Full Name				Relationship								
Company						Phone						
Address												
Full Name				Relationship								
Company						Phone						
Address												
Full Name				Relationship								
Company						Phone						
Address												

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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Instructor Application Form

Dear Applicant:

We are required to provide the following items to Nevada Commission on Postsecondary Education:

- * Form 40b Instructor (I will complete that on your behalf)
- * Form 40c Fingerprint Background Waiver form - You must go to an agency that does fingerprinting. Nevada Commission on Postsecondary Education provides the following list of private agencies that perform this service and will have the Form40c.

Privately Owned Fingerprint Agencies

Accutest, 9187 West Flamingo #110, Las Vegas, NV 89147, 1-877-472-6916

American Fingerprint, 1201 S. Jones, 103, LV NV 89146, 702-822-1590

B&D Fingerprint, 800 N. Rainbow #175, LV NV 89107, 702-485-5256

Burton Studios, 6235 S. Pecos, #107, LV NV 89120, 702-456-9190

Fingerprinting Pros, 2620 S. Maryland Pkwy, #17, LV NV 702-734-2665

Prints, Pics, More, 3150 E. Tropicana #K, LV NV 89121, 702-476-6900

Two mobile services are available by appointment only. They are:

Express eElectronic Fingerprinting Services, 702-856-6335

Four Sisters Mobile Fingerprinting Services, 702-436-5076

- * Letters of verification of appropriate experience for at least two years.
- * High School Transcript
- * Resume or Curriculum Vita
- * A list of any related coursework