



Location: \_\_\_\_\_

<b>Today's Date:</b> _____		<b>MT General</b>		<i>EMPLOYMENT APPLICATION</i>	
APPLICANTS NAME (LAST) _____ (FIRST) _____ (MIDDLE INITIAL) _____			SOCIAL SECURITY NUMBER _____ - _____ - _____		
HOME ADDRESS (STREET) _____		(CITY) _____		(ZIP CODE) _____	
HOME TELEPHONE NUMBER ( ) - _____		WORK TELEPHONE NUMBER ( ) - _____		CELL OR MESSAGE TELEPHONE NUMBER ( ) - _____	
OPEN POSITION APPLYING FOR / JOB NUMBER _____			DATE AVAILABLE FOR WORK _____		
HOW DID YOU LEARN ABOUT THIS OPENING? _____			SHIFT(S) AVAILABLE <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Nights <input type="checkbox"/> Weekends		
HAVE YOU EVER BEEN EMPLOYED WITH US BEFORE? <input type="checkbox"/> No <input type="checkbox"/> Yes, when? _____		STARTING SALARY EXPECTATIONS \$ _____		WORK PREFERENCE <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No		May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If not, employment is subject to minimum legal age.)</i>					
Are you legally entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Proof of right to work in the U. S. will be required if hired.)</i>					
Are you eligible to receive any and all permits/licenses by law? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Have you ever been discharged or asked to resign from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If Yes, please explain _____					
Have you ever been convicted of a felony or misdemeanor? <i>(Conviction will not necessarily disqualify you from employment.)</i>					
<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please indicate the date and nature of (any and all) offense(s) _____					
Are you able to perform the essential functions of the job for which you are applying with or without reasonable accomodation?					
<input type="checkbox"/> Yes <input type="checkbox"/> No If no, describe the function(s) that cannot be performed. _____					

**Education**

	Name & Location of School	Years Completed	Graduated	Degree Earned
HIGH SCHOOL	_____		<input type="checkbox"/> Yes <input type="checkbox"/> No	
VOCATIONAL	_____		<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE	_____		<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER	_____		<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Job Related Skills**

Please answer the following if the position you are applying for involves these skills.	
<input type="checkbox"/> Typing _____ wpm	<input type="checkbox"/> Ten Key: <input type="checkbox"/> Touch <input type="checkbox"/> Sight
<input type="checkbox"/> Personal Computer and software used: _____	
<input type="checkbox"/> Word Processing	<input type="checkbox"/> Other computer skills: _____
<input type="checkbox"/> Accounting _____	
<input type="checkbox"/> Foreign Language: Indicate any that you can speak, read and/or write _____	
Indicate any other skills related to the position you are seeking: _____	
_____	
_____	





# RED LION HOTELS CORPORATION

## VOLUNTARY APPLICANT INFORMATION FORM

As a qualified federal contractor, Red Lion Hotels Corporation is an Affirmative Action, Equal Opportunity Employer. We hire, train, pay and promote without regard to race, color, sex, age, national origin, veteran status, religion, marital status, or disability. We encourage applications from all qualified individuals, including Vietnam era veterans, disabled veterans, individuals with disabilities, females and minorities.

Please complete this voluntary form to assist us in complying with our Affirmative Action reporting requirements. This form will be kept in a confidential file, separate from your application materials. The information is used only for reporting purposes and will not affect our hiring decision. Refusal to provide the information will not result in any adverse treatment.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

**Race/Ethnic Group** (please check one):

White (not of Hispanic origin)

Black (not of Hispanic origin)

Hispanic

Asian or Pacific Islander

American Indian or Alaskan Native

**Sex:**

Male

Female

***Thank you!***

Please return this completed form at the same time you turn in your application materials.

**COMPANY USE ONLY:**

EEO-1 OCCUP CATEGORY: \_\_\_\_\_ JOB GROUP CODE: \_\_\_\_\_ VISUAL SURVEY: \_\_\_\_\_ EMPLOYER REPRESENTATIVE: \_\_\_\_\_