



**Bluepoint Hospitality Group LLC
EMPLOYMENT APPLICATION**



Bluepoint Hospitality Group LLC is an equal opportunity employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. Our intention is that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

GENERAL

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

- Job applied for _____ Today's Date _____
- Type of employment you are seeking: Full-time Part-time Temporary When could you start work? _____

LAST NAME	FIRST NAME	MIDDLE NAME	TELEPHONE NUMBER
STREET ADDRESS		CITY	STATE/ZIPCODE
			EMAIL ADDRESS

- If hired, can you furnish proof you are eligible to work in the U.S.? Yes No
Note: Proof of U.S. citizenship or immigration status is required if hired.

- Have you ever applied here before? Yes No If yes, when? _____

- Have you ever been convicted of any law violation?
 Include any plea of "guilty" or "no contest." (Exclude minor traffic violations.) Yes No
 If yes, give details _____
 (A conviction will not necessarily disqualify an applicant for employment.)

- If employed, do you expect to be engaged in any additional business or employment outside of our job? Yes No
 If yes, give details _____

- At times your position may require you to lift and move boxes. Do you have the ability to lift forty pounds? Yes No

EDUCATION

NAME AND ADDRESS OF SCHOOL	NUMBER OF YEARS COMPLETED	DIPLOMA/ DEGREE/ CERTIFICATE	SUBJECTS STUDIED
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High School

College or University

Vocational/Technical

What skills, certificates or licenses do you possess that are relevant to the position for which you are applying? _____

List any relevant POS (point of sale) and computer experience that you have: _____

Bluepoint Hospitality Group LLC

EMPLOYMENT HISTORY, Please list names of employers in consecutive order with present or last employer listed first.

NAME OF EMPLOYER	JOB TITLE AND DUTIES
ADDRESS	DATES OF EMPLOYMENT
CITY, STATE, ZIP CODE	REASON FOR LEAVING
NAME OF EMPLOYER	JOB TITLE AND DUTIES
ADDRESS	DATES OF EMPLOYMENT
CITY, STATE, ZIP CODE	REASON FOR LEAVING
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NAME OF EMPLOYER	JOB TITLE AND DUTIES
ADDRESS	DATES OF EMPLOYMENT
CITY, STATE, ZIP CODE	REASON FOR LEAVING

REFERENCES, Please list three references that we may contact, preferably professional references.

Note: A job offer may be contingent upon acceptable references.

NAME OF REFERENCE	HOW DO YOU KNOW REFERENCE?	PHONE NUMBER	EMAIL ADDRESS
1			
2			
3			

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

- I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.
- I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.
- I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

APPLICANT NAME

APPLICANT SIGNATURE

DATE

This application for employment will remain active for a limited time. Ask the organization’s representative for details.