

Sunset Bay Beach Club & Cabana Sam's Employment Application

Today's Date:

Personal Information

Name (Last, First, MI)

Street address

City, State, Zip

Home phone number

Cell phone number

E-Mail Address (if you use it)

Social Security Number

Employment Desired

Position applied for

How did you hear about this position?

Date available for work

Desired hours (days, times, # of hrs, etc.)

Education

	Name of School	Course of Study	Total Years	Degree/Diploma
High School				
Undergraduate College				
Graduate/ Professional				

Employment History

List below all present and past employers, starting with your **most recent** employer. List employers relevant to position you are applying for. May we contact your current employer? YES NO

1.	Employer (current <input type="checkbox"/> Yes <input type="checkbox"/> No)	Start Date	End Date	Essential job functions of final position
	Address			1.
	City, State, Zip	Starting Pay	Ending Pay	2.
	Phone number			3.
	Job Position Held	Supervisor		Supervisor Contact #
	Reason(s) for leaving			
2.	Employer	Start Date	End Date	Essential job functions of final position
	Address			1.
	City, State, Zip	Starting Pay	Ending Pay	2.
	Phone number			3.
	Job Position Held	Supervisors		Supervisors Contact #
	Reason(s) for leaving			

Additional Information

Have you ever been employed with this company before? Yes No
 If Yes, When/Where? _____

Do you have any friends or relatives employed by this company? Yes No
 If Yes, please provide their names & relationship to you: _____

Are you currently on "lay off" status and subject to recall? Yes No

If you are under 18 years of age, can you provide proof of your eligibility to work? Yes No

If hired, can you provide proof of U.S. citizenship or proof of your legal right to work in the U.S.? Yes No

Are you able to perform all of the essential functions of the job for which you are applying? Yes No

Have you ever been convicted of a crime? Yes No
 If Yes, please explain: _____

Have you ever been let go or fired from another company? Yes No
 If Yes, please explain: _____

Have you ever been counseled or disciplined for being late or absent from work? Yes No
 If Yes, please explain: _____

What is your proudest accomplishment? _____

What does great service mean to you? _____

What are your hobbies & interests? _____

References

List below two people not related to you who have knowledge of your work performance.

Name		Occupation
Telephone	E-mail	Relationship & years acquainted
Name		Occupation
Telephone	E-mail	Relationship & years acquainted

Complete and Accurate Information

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand any omission or misstatement of material fact on this application, or any other document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discover.

Signature

Date

Contact: Kelly Borrello, GM Sunset Bay Beach Club and Cabana Sam's Sunset Bay Grill
 1028 South Shore Drive Irving, NY 14081
 716-698-2934 (cell) kborrello@sunsetbayusa.com
www.sunsetbayusa.com

Please read each statement closely and initial each, acknowledging your understanding.

NAME: _____

Equal Employment Opportunity Statement

We are an Equal Opportunity Employer. All applicants are considered without regard to race, color, religion, disability, sex, national origin, age, or any other basis protected by federal, state, or local law. This employment application is only active for 30 days. This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

Discrimination and Sexual Harassment Policy Statement

This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

Disclosure to Applicants Concerning Drug/Alcohol Use and Testing

This company takes drug and alcohol abuse as a serious matter and will not tolerate it. The company absolutely prohibits the use, sale or solicitation of non-prescribed drugs at the work place or while on company premises. The company prohibits the use of alcohol by any employee while working or before scheduled to work. Employees under 21 are forbidden by law to use alcohol on company premises. The company also discourages non-work place drug and alcohol abuse. The use, sale or possession of alcohol or non-prescription drugs while on the job or on company property may result in immediate suspension or discharge.

The company also cautions against use of prescribed or over-the-counter medication which can affect your work place performance. You may be suspended or discharged if the company concludes that you cannot perform your job properly or safely because of using over-the-counter or prescribed medication. Please inform your supervisor prior to working under the influence of a prescribed or over-the-counter medication which may affect your performance.

At-Will Employment

I understand and agree that if I am employed, my employment will be "at-will", which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice.

Testing Authorization

If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment.

Investigation Authorization

I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

Company Obligation

I understand and agree that the Company's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the Company has agreed to hire me. I understand that the Company is under no obligation to hire me as the result of accepting this completed application.

I HAVE READ & UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.

Signature

Date

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