



Application for Employment

Hotel (843) 856-0028 Fax (843) 856-8333 20 Patriots Point Road, Mount Pleasant, SC 29464

We are an equal opportunity employer. It is our policy that all applicants be considered solely on the basis of qualifications and ability, without regard to race, color, religion, creed, gender, national origin, age, disability, military or veteran's status, or other legally protected statuses.

PLEASE PRINT AND COMPLETE FORM IN DETAIL.

Position(s) Applied For	Date of application
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PERSONAL INFORMATION			
Last Name	First Name	Middle Name	Generation
Telephone Number	Cell Number	Email Address	

RESIDENTIAL ADDRESSES FOR LAST 3 YEARS						
Address	City	State	Zip	Country	Dates	From-To

CRIMINAL HISTORY	Most convictions will not automatically disqualify job candidates. The seriousness of an offense, how the offense relates to the job you are applying for, and the date of conviction are considered.				
Have you ever been convicted of a felony or misdemeanor in the last 5 years? ____Yes ____No					
Date	County	City	State	Charge Disposition	

EDUCATIONAL BACKGROUND				
High School	Address	Course of Study	Dates	Diploma/Degree
Undergraduate Col	Address	Course of Study	Dates	Diploma/Degree
Other (Specify)	Address	Course of Study	Dates	Diploma/Degree

WORK EXPERIENCE		
Start with your present or most recent job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, creed, gender, national origin, disability or other protected statuses.		
Employer	Dates Employed From To	Work Performed/Responsibilities
Address		
Telephone Number(s)		
Starting Job Title	Hourly Rate/Salary Beginning Ending	
Supervisor		
May we contact? ____Yes ____No	Reason for Leaving	

Employer	Dates Employed From To	Work Performed/Responsibilities
Address		
Telephone Number(s)		
Starting Job Title	Hourly Rate/Salary Beginning Ending	Reason for Leaving
Supervisor		
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Employer	Dates Employed From To	Work Performed/Responsibilities
Address		
Telephone Number(s)		
Starting Job Title	Hourly Rate/Salary Beginning Ending	Reason for Leaving
Supervisor		
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		

ADDITIONAL INFORMATION	
Are you legally eligible for employment in the United States? <i>(Proof of citizenship or immigration status will be required upon employment)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you're under 18 years old, can you provide required proof of your eligibility to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you available to work: <input type="checkbox"/> Full Time (Please indicate 1 2 3 shift) Date available to start: <input type="checkbox"/> Part Time (Please indicate Mornings Afternoons Evenings) <input type="checkbox"/> Seasonal <input type="checkbox"/> On Call	
Can you Travel if a job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you willing to relocate, if necessary? <input type="checkbox"/>	
Are you capable of performing in a reasonable manner, with or without reasonable accommodation the activities involved on the job for which you have applied?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been employed with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, give dates:	
Do any of your friends or relatives work here? <input type="checkbox"/> Yes <input type="checkbox"/> No	

APPLICANT'S STATEMENT/RELEASE OF INFORMATION WAIVER	
- I certify that the answers given herein are true and complete.	
- I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize all corporations, companies, credit agencies, educational institutions, persons, law enforcement agencies, former and current employers and military services to release information to consumer credentials. I release them from any liability and responsibility for doing so. I also authorize the procurement of a consumer credit report and understand that it may contain information about my background, mode of living, character and personal reputation. This authorization in original, fax or copy form shall be valid for this and future reports for updates that may be requested.	
- This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.	
- I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may dismiss the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.	
- In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in dismissal. I understand, also, that I am required to abide by all rules and regulations of the employer. I understand that a background check may be performed as needed throughout the course of my employment to ascertain any and all information that may be pertinent to my employment or promotion.	
Signature:	Date: