



Employment Application

201 S Kinney Rd
Tucson AZ 85735-9321
(520) 883-0100
FAX (520) 578-1269

Instructions: All items must be completed in their entirety for application to be valid. The information you provide will allow us to consider you for the position(s) you desire and other positions for which you may be qualified. All information will be kept confidential.

Notice: All offers of employment are contingent upon your providing proof of identity and lawful authorization to work in the U.S. and your completing a form I-9, as required by Immigration Reform and Control Act of 1986.

Please print all responses except your signature.

Date of application: _____ Date available: _____ Wage desired: _____ per

Position(s) desired: _____

Name Last: _____ First: _____ Middle: _____

Address: _____ City: _____ State: _____ Zip: _____

Primary Phone #: _____ Alternate Phone #: _____ Email address: _____

Are you prepared to provide a Social Security Number and evidence of your U.S. citizenship or proof of your legal right to live and work in this country if offered a position? Yes No

Are you at least as old as... 16 years old? Yes No 18 years old? Yes No

Are you willing and able to work holidays? Yes No Do you have any restrictions on working overtime? Yes No Are you available to work: Either Full or Part Time Full Time Part Time

The position you are applying for requires drug-free status with regards to all illegal drugs and prescription drugs for which you do not have a current prescription. The position also requires satisfactory completion of a pre-employment drug screening and periodic submission to drug tests. Can you meet these requirements of the position for which you have applied? Yes No

Are you available to work any shift, any day of the week? Yes No

If not, please describe when you are available and unavailable to work.

Indicate with an "X" experience in the following:

- | | | | | |
|----------------------------------------------|------------------------------------------|-------------------------------------|----------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Filing | <input type="checkbox"/> Bartender | <input type="checkbox"/> Gift Shop | <input type="checkbox"/> Banquet Houseperson |
| <input type="checkbox"/> Accounts Payable | <input type="checkbox"/> Payroll | <input type="checkbox"/> Busperson | <input type="checkbox"/> General Maintenance | <input type="checkbox"/> Banquet Table Waiting |
| <input type="checkbox"/> Accounts Receivable | <input type="checkbox"/> Personnel | <input type="checkbox"/> Catering | <input type="checkbox"/> Hostess/Host | <input type="checkbox"/> Snack Bar |
| <input type="checkbox"/> Bookkeeper | <input type="checkbox"/> Typing: WPM | <input type="checkbox"/> Cook | <input type="checkbox"/> Purchasing | <input type="checkbox"/> Table Waiting |
| <input type="checkbox"/> Cashier | <input type="checkbox"/> Word Processing | <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Sales | <input type="checkbox"/> Cocktail Waiting |
| <input type="checkbox"/> Computer | | <input type="checkbox"/> Security | | |

Are there any other experiences, skills or qualifications you feel would aid in your work with Old Tucson? Please list:

Educational Record

High School: Name: _____ Address: _____ Graduate? Yes No

College or University: Name: _____ Address: _____ Major Field: _____ Graduate? Yes No

Technical/Business/Other School: Name: _____ Address: _____ Major Field: _____ Graduate? Yes No

Other Skills or Training: _____ Professional License: _____ Languages Spoken: _____

Describe any special training or courses you have had relating to the position or type of work you are seeking.

Have you been employed by Old Tucson before? Yes No
Have you ever applied for work at Old Tucson before? Yes No
If yes to either, when? _____
If hired, do you have adequate transportation to and from work? Yes No

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Employment Record

In the space below, account for all time for the past 7 years, whether working or not. **START WITH YOUR MOST RECENT EXPERIENCE AND WORK BACKWARDS.** Include military service and any periods of unemployment. Give complete names and addresses. If self-employed, give firm name. Attach additional sheets, if necessary, to cover the past 7 years. **YOU MUST COMPLETE THIS SECTION EVEN IF ATTACHING A RESUME.**

If you are presently employed, may we contact your present employer? Yes No

From (Mo/Yr)	Name, address and phone number of employer:	Position Held:
To (Mo/Yr)		Ending Pay:
Type of Business:		Name of Supervisor:
		Why did you leave?

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From (Mo/Yr)	Name, address and phone number of employer:	Position Held:
To (Mo/Yr)		Ending Pay:
Type of Business:		Name of Supervisor:
		Why did you leave?

Explain any periods of unemployment:	Do you have any relatives working at Old Tucson? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state the name(s) of relative(s) and relationship(s)	Have you ever worked using another name? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain
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How were you referred to us? Walk-in Relative Agency Newspaper Friend
 OTS website Other website (Name of site): _____ Other

Give a brief statement why you feel you are qualified for this position:

Certification, Authorization, Release and Waiver – READ CAREFULLY BEFORE SIGNING

I certify that the information given by me in this Employment Application is true and complete and I understand and agree that my employment with the company may be immediately discontinued if misrepresentation, falsified statements, or material omissions are found to have been made. I authorize schools, former employers and former supervisors to provide any and all information pertinent to my employability and hereby release those providing such information from any liability for doing so. I also understand that employment, if offered, is contingent upon my providing additional information for employee record purpose and upon my providing proof of identity and lawful authorization to work in the U.S., and completing a form I-9. I also understand that the company may terminate me at any time, with or without cause and without liability, and that my employment here does not constitute a contract of employment between myself and the company. I further understand that the term of employment at this company is for such period as the company may deem my services to be satisfactory and desirable. I will comply with and be governed by all company policies, rules, and procedures as may be in effect from time to time. I have read the above, understand its content and meaning and agree to all of its provisions. I understand that, upon my request, I will be provided with a copy of my executed employment application. **A PRE-EMPLOYMENT DRUG AND CRIMIAL BACKGROUND CHECK MAY BE REQUIRED. EMPLOYMENT IS CONTINGENT UPON SATISFACTORY RESULTS.**

Sign Here: _____ Date: _____
 Applicants emailing their application and unable to provide a physical signature at this time must type their initials and date to affirm the above (or provide a signed copy at the earliest possible occasion in the hiring process) in order to continue being considered. Initials/date:

This Company is an Equal Opportunity Employer and a Drug-Free workplace. We select qualified individuals for employment based upon job-related factors, regardless of race, color, religion, gender, age, national origin, disability, veteran status or other legally protected factors.