



www.heartlandinns.com

EMPLOYMENT APPLICATION

Applicant's Name _____

EMPLOYMENT APPLICATION

Heartland Inns of America

Answer each question completely. If more space is needed, use last page.

Date _____

Name _____ Social Security Number _____ - _____ - _____
Street _____ City, _____
Address _____ State/Zip _____
Home _____ Work _____ Alternate _____
Phone (____) _____ - _____ Phone (____) _____ - _____ Phone (____) _____ - _____

Position _____ At which _____
Desired _____ Location/City _____

AVAILABILITY ___ Full-time ___ Part-time ___ Temporary ___ Weekdays ___ Weekends
___ Days ___ Evenings ___ Nights ___ Other (days/hours) _____

1. Have you ever applied or worked for Heartland Inn/Heartland Management before? Yes No
Identify position applied for, date, location/city, or position held, date location/city:
2. Have you ever been convicted of a criminal offense? Yes No
Conviction will not automatically exclude you from employment. If yes, list offense(s), date(s) location/city.
3. Have you ever received discipline, been terminated, or forced to resign from any position? Yes No
If yes, please explain.
4. Federal law requires proof of identity and employment eligibility. Are you a citizen/national of the United States or can you provide proof of identity and employment eligibility? Yes No
5. Applicants and employees have the right to request reasonable accommodation. Are you able to perform the essential functions of the position with or without accommodation? Yes No
___ None needed; Or, identify accommodation needs: _____
6. For positions which child Labor Laws govern: Are you age 18 or older? Yes No
7. Have you ever worked under another name(s)? If yes, please indicate: Yes No

EDUCATION	Name and Location of School and Course of Study	Dates From / To	Graduate?
HIGH SCHOOL		From:	Yes No
		To:	
BUSINESS / TRADE / TECHNICAL SCHOOL		From:	Yes No
		To:	
COLLEGE / UNIVERSITY / GRADUATE SCHOOL		From:	Yes No
		To:	

Membership in Professional/Civic Organizations (Exclude those that disclose race, color, religion, etc.)

Other Special Training or Skills (languages, computer or office equipment, machinery, etc.)

PAST EMPLOYMENT and EXPERIENCE

List all past employers, most recent first. Include correct present telephone numbers and area codes.

Most Recent Employer	Your job title		
Address/City/State/Zip	Employed From (Mo./Day/Year) To (Month/Day/Year)		
Name of Supervisor	Salary	Beginning	Ending
Employer Phone Number Area code (____) _____ - _____	Reason for leaving		
Describe responsibilities			

Are you currently working for this employer? Yes No If yes, may we contact? Yes No

List all past employers. If more space is needed, include additional pages.

Employer	Your job title		
Address/City/State/Zip	Employed From (Mo./Day/Year) To (Month/Day/Year)		
Name of Supervisor	Salary	Beginning	Ending
Employer Phone Number Area code (____) _____ - _____	Reason for leaving		
Describe responsibilities			

Are you currently working for this employer? Yes No If yes, may we contact? Yes No

List all past employers. If more space is needed, include additional pages.

Employer	Your job title		
Address/City/State/Zip	Employed From (Mo./Day/Year) To (Month/Day/Year)		
Name of Supervisor	Salary	Beginning	Ending
Employer Phone Number Area code (____) _____ - _____	Reason for leaving		
Describe responsibilities			

List all past employers. If more space is needed, include additional pages.

Employer	Your job title		
Address/City/State/Zip	Employed From (Mo./Day/Year) To (Month/Day/Year)		
Name of Supervisor	Salary	Beginning	Ending
Employer Phone Number Area code (____) _____ - _____	Reason for leaving		
Describe responsibilities			

PAST EMPLOYMENT and EXPERIENCE Continued--

List all past employers. If more space is needed, include additional pages.

Employer	Your job title		
Address/City/State/Zip	Employed From (Mo./Day/Year) To (Month/Day/Year)		
Name of Supervisor	Salary	Beginning	Ending
Employer Phone Number Area code (____) _____ - _____	Reason for leaving _____		
Describe responsibilities			

REFERENCES

List name and telephone numbers of business, work, or personal references. If more space is needed, include additional pages.

Name/Title	# Years Known	Day Phone	Evening Phone
_____	_____	(____) _____ - _____	(____) _____ - _____
_____	_____	(____) _____ - _____	(____) _____ - _____
_____	_____	(____) _____ - _____	(____) _____ - _____
_____	_____	(____) _____ - _____	(____) _____ - _____

If offered a position, on what date would you be available to start work?

Please identify any vacation commitments or specific days you will not be available to work, or anything further that you think would be helpful to us as we continue in our considerations:

RELEASE OF INFORMATION

I, the undersigned, certify the information provided herein is true and complete to the best of my knowledge.

I understand if there are omissions or any statement(s) made in this application that prove to be false, misleading, or misrepresentations of facts, it may result in the rejection of my application or termination of employment. This application is the property of HEARTLAND INN and will not be returned. I authorize a full background investigation (within 45 days) regarding my education, employment, criminal history, and motor vehicle driving records. I authorize references, employers, schools, law enforcement authorities, and any other persons or record keepers to give information they have about my character, ability to perform the requirements of the position, and employment records to Heartland Inn/Heartland Management. I unconditionally release any named or unnamed informant from any and all liability resulting from furnishing information. Should I be selected for employment, I understand I have the right to request reasonable accommodation, made to the hiring authority. I also understand this application is not a contract of employment and any offer of employment is "at-will" and may be terminated by myself or by the company at any time for any reason or no reason at all, with or without prior notice. Any offer of employment is contingent upon satisfactorily passing any required physical examination.

Date _____ Applicant Signature _____