

Application for Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the applications and/or interview process should notify a representative of the Human Resource Department.

Name: _____
Last
First
Middle

Address: _____
Street
City
State
Zip Code

Home Telephone: _____ Cell / Other Phone: _____ SSN #: _____

If necessary, the best time to call you at home is: _____ AM PM

May we contact you at work? Yes No

If yes, work number and best time to call: _____ AM PM

Have you ever been employed by Southwest Scenic Group Before? Yes No If yes, please give dates: _____

Are you legally eligible for employment in this country? Yes No

Date Available for Work: _____

Type of Employment Desired: FULL TIME PART TIME TEMPORARY SEASONAL OTHER:

Are you able to meet the attendance requirements of the position? Yes No

Will you work overtime if required? Yes No

Have you ever been bonded? Yes No

Have you been convicted of a crime in the last (7) years? Yes No

If yes, please explain: _____

CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. EACH INSTANCE AND EXPLANATION WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH YOU ARE APPLYING

Driver's license number if driving is an essential job function: _____ State: _____

Commercial Driver's License number (if applicable): _____ State: _____

Are you licensed to operate a forklift? Yes No

EDUCATIONAL BACKGROUND IF JOB-RELATED

A. List last three (3) Schools attended, starting with most recent. **B.** List number of years completed. **C.** Indicate Degree or degree or diploma earned, if any. **D.** Grade Point Average or Class Rank. **E.** Major field of study.

A. School	B. Years Completed	C. Degree Diploma	D. GPA	E. MAJOR

REFERENCES

List name and Telephone number of three business, Work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Telephone	Years Known

ADDITIONAL INFORMATION

List professional, trade, business, or civic associations and any offices held.

EXCLUDE MEMBERSHIPS WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, DISABILITY OR ANY OTHER SIMILARLY PROTECTED STATUS.

ORGANIZATION	OFFICE / POSITION HELD

EMPLOYMENT HISTORY

Provide the following information for your past and currently employers, assignments or volunteer activities, starting with the most recent (request and use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	PHONE	DATES EMPLOYED FROM TO	SUMMARIZE THE TYPE OF WORK PERFORMED AND YOUR JOB RESPONSIBILITIES
ADDRESS			
JOB TITLE		Hourly Rate / Salary STARTING	
SUPERVISOR NAME & TITLE			
REASON FOR LEAVING		Hourly Rate / Salary FINAL	
MAY WE CONTACT FOR REFERENCE ?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
EMPLOYER	PHONE	DATES EMPLOYED FROM TO	SUMMARIZE THE TYPE OF WORK PERFORMED AND YOUR JOB RESPONSIBILITIES
ADDRESS			
JOB TITLE		Hourly Rate / Salary STARTING	
SUPERVISOR NAME & TITLE			
REASON FOR LEAVING		Hourly Rate / Salary FINAL	
MAY WE CONTACT FOR REFERENCE ?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Comments: INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT _____

Skills and Qualifications: Summarize any special training, skills, licenses and /or certificates that may qualify you as being able to perform job-related functions in the positions for which you are applying.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and Southwest Scenic Group reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of SSG, other than the authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer. I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Applicant Signature _____

Date _____