

# RAMADA CONFERENCE CENTER

1450 S. ATHERTON ST., STATE COLLEGE, PA 16801 (814)238-3001, www.ramadasc.com

## APPLICATION FOR EMPLOYMENT

WE ARE A DRUG FREE WORKPLACE

Full Name \_\_\_\_\_ Cell phone # \_\_\_\_\_

Address \_\_\_\_\_ Other phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Email: \_\_\_\_\_

Position Desired (Please specify) \_\_\_\_\_

(Check all that apply)

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ On-Call \_\_\_\_\_ Temporary \_\_\_\_\_

Rate of Pay Desired: \_\_\_\_\_

Date available to start work \_\_\_\_\_ Are you over 18 years of age? \_\_\_\_\_ Do you have transportation? \_\_\_\_\_

In Case of Accident Notify \_\_\_\_\_ Telephone No. \_\_\_\_\_

Relatives or friends employed at this property \_\_\_\_\_

Have you previously been employed here? \_\_\_\_\_ If yes, from \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving \_\_\_\_\_

If you are offered employment, can you submit certification of your right to legally remain in and be employed by the U.S. indefinitely? \_\_\_\_\_ yes \_\_\_\_\_ no

Have you ever been convicted of a crime? (such a conviction will not necessarily prevent employment) \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, please list all convictions: \_\_\_\_\_

Please provide any other name(s) under which you have been employed:

Can you perform the functions of the "position desired" with or without reasonable accommodation? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ I have not yet been informed about the requirements of the job for which I am applying. (Do not answer yes or no unless you *have* been informed about the requirements of the job for which you are applying.)

How did you hear of us?: \_\_\_\_\_

## EDUCATION

Type	Name of School	Graduated	Degree
Grade School	_____	Yes No	_____
High School	_____	Yes No	_____
College/University	_____	Yes No	_____

## PERSONAL REFERENCES (not previous employers)

Name	Address	Telephone	How Long Known
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1. \_\_\_\_\_

2. \_\_\_\_\_

## **EMPLOYMENT HISTORY**

### ***1. Present or Last Employer:***

Company Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Your Position \_\_\_\_\_ Your Supervisor \_\_\_\_\_ Date of Employment: From \_\_\_\_\_

To \_\_\_\_\_ Rate of Pay \_\_\_\_\_

Reason for leaving \_\_\_\_\_

### ***2. Second Previous Employer:***

Company Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Your Position \_\_\_\_\_ Your Supervisor \_\_\_\_\_ Date of Employment: From \_\_\_\_\_

To \_\_\_\_\_ Rate of Pay \_\_\_\_\_

Reason for leaving \_\_\_\_\_

### ***3. Third Previous Employer:***

Company Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Your Position \_\_\_\_\_ Your Supervisor \_\_\_\_\_ Date of

Employment: From \_\_\_\_\_ To \_\_\_\_\_ Rate of Pay \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**MAY WE CONTACT YOUR PRESENT/PAST EMPLOYER? ☐yes ☐no ☐not applicable**

Applications are maintained on file for six months and then considered inactive. If you still wish to be considered after six months, completion of another application will be necessary.

The Ramada Conference Center is firmly committed to providing equal employment opportunities in all phases of employment without regard to race, color, sex, religion, cancer-related medical condition, national origin, ancestry, disability, age, marital status or Vietnam-era veteran status.

I understand that this application is not a contract of employment and that any individual who is hired may voluntarily leave employment or may be terminated by the Ramada Conference Center at any time and for any reason. I understand that any oral or written statements to the contrary made by any Ramada employee are hereby expressly disavowed and must not be relied upon by any prospective or existing employee.

I voluntarily provide written consent for The Ramada Conference Center to conduct a criminal background check and/or credit report as part of the hiring process. I understand that this background check may include a review of criminal records or information about my credit report at the local, state, and federal levels, and may involve third-party agencies. By signing below, I acknowledge my rights under the Fair Credit Reporting Act (FCRA) and confirm that the information provided is accurate and truthful to the best of my knowledge.

I voluntarily provide written consent for The Ramada Conference Center to conduct a drug screening as part of the pre-employment process, ongoing employment requirements, or as otherwise required by company policy. By signing below, the individual acknowledges their understanding that the screening will test for the presence of controlled substances and may be conducted by a certified third-party laboratory. The individual agrees to comply with all testing procedures and understands that the results may be used in making employment-related decisions.

I fully understand that any misrepresentation, false statement or omission of material fact made on this application may be considered sufficient cause for termination should I be employed by the Ramada Conference Center.

Signature (required) \_\_\_\_\_ Date \_\_\_\_\_