

# EMPLOYMENT APPLICATION



## BEACH RESORT *Monterey*

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*An Equal Opportunity Employer*

# BEACH RESORT *Monterey*

## EMPLOYMENT APPLICATION

Date of Application: \_\_\_\_\_

Name:		
Address:		
City:	State:	Zip Code:
Home Phone:	Social Security Number:	

### GENERAL INFORMATION

Position applied for: _____
Available to work: <b>Full-Time</b> <b>Part-Time</b> <b>Temporary</b>
Date available to start work: _____
Shift desired: <b>Day</b> <b>Night</b> <b>Swing</b> <b>All</b>
If you are under age 16, can you provide a work permit if offered a job? <b>Yes</b> <b>No</b>
If offered a position, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? <b>Yes</b> <b>No</b>
Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>
<small>(Note: Please exclude convictions for marijuana-related offenses more than two years old; convictions that have been sealed, expunged, or legally eradicated; and misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed. A conviction is not an automatic bar to employment. Each case will be considered on its own merits.)</small>
If yes, please identify the charge, the court, the date of the conviction, and the disposition of the case: _____ _____
Have you ever applied for a position with or worked for this Company before? <b>Yes</b> <b>No</b>
If yes, specify dates: From: _____ To: _____

### EDUCATION

	Name of School and Address	Major	No. of Years Completed	Did you Graduate?
High School				
College				
Other (Specify)				

# EMPLOYMENT HISTORY

**Please list your present and past work experience for the last 10 years, beginning with your current job. You may include volunteer activities.**

Name of Employer:	From Month      Year	To Month      Year
Address: <small>(Street, City &amp; State)</small>	Telephone:	Starting:      Pay
Position:	Supervisor:	Final:
Description of Duties:		
Reason for Leaving:		
Name of Employer:	From Month      Year	To Month      Year
Address: <small>(Street, City &amp; State)</small>	Telephone:	Starting:      Pay
Position:	Supervisor:	Final:
Description of Duties:		
Reason for Leaving:		
Name of Employer:	From Month      Year	To Month      Year
Address: <small>(Street, City &amp; State)</small>	Telephone:	Starting:      Pay
Position:	Supervisor:	Final:
Description of Duties:		
Reason for Leaving:		

**If you need additional space, please continue your response on a separate page.**

**Please identify and explain all periods of unemployment in excess of one month during the past 10 years:**

**Period of Unemployment:**

From:	To:	Reason for Unemployment
_____	_____	_____
_____	_____	_____

To assist us to check records and to verify prior employment and education, please indicate whether you were ever employed or enrolled in a school under a name other than that used on this application:

<b>Yes</b>	<b>No</b>
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If yes, please specify the name you were employed or enrolled under: \_\_\_\_\_

If you are employed now, may we contact your current employer?	<b>Yes</b>	<b>No</b>
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Are you able to perform the essential duties of the position for which you are applying, either with or without reasonable accommodations?	<b>Yes</b>	<b>No</b>
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**References:** Please provide the names, addresses, and telephone numbers of at least two references who are not related to you who have knowledge of your work performance within the last 5 years:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Work Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Work Relationship: \_\_\_\_\_

**I hereby certify** that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by the Beach Resort unless I have indicated to the contrary. I authorize the references listed above, as well as all other individuals whom the Beach Resort contacts, to provide the Beach Resort any and all information concerning my previous employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the Beach Resort as well as from any use or disclosure of such information by the Beach Resort or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment.

*In consideration of my employment, I agree to conform to the rules and standards of the Beach Resort. I further agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or at the option of the Beach Resort. I understand that no employee or representative of the Beach Resort, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. Further, no employee or representative of the Beach Resort may alter the at-will nature of the employment relationship. I agree that this constitutes an integrated agreement with respect to the at-will nature of my employment relationship, that it is final and fully binding, and that there are no oral, written, or collateral agreements regarding this issue.*

I also understand that all offers of employment are conditioned on the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Disclosure and Authorization to Obtain  
Investigative Consumer Report and  
Social Security Number Verification**

In connection with my application for employment or promotion or other job change, I understand that the Beach Resort Monterey may obtain an INVESTIGATIVE CONSUMER REPORT that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, work habits, job performance, experiences and abilities and reasons for termination of past employment. Such a report may be requested by the Beach Resort or on behalf of the Beach Resort.

The consumer report will be ordered from:

Pacific Credit Services  
P O Box 339  
Watsonville, CA 95077-0339  
831-724-6328

I hereby authorize and consent to the Beach Resort's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, the Beach Resort will provide me with a copy of any such report if the information contained in such a report is, in any way, to be used in making a decision regarding my fitness for employment with the Beach Resort. I have a right to obtain a copy of any investigative consumer report obtained by the Beach Resort by checking the box provided below. The report will be provided to me within three business days after the report is provided to the Beach Resort.

I acknowledge that a fax or copy of this Disclosure and Authorization bearing my signature shall be as valid as the original. This release is valid for all federal, state, county and local agencies and authorities. I acknowledge that I have received a copy of the Summary of Rights pursuant to the Fair Credit Reporting Act (FCRA).

**In addition to the above mentioned Consumer Credit Report we will be verifying all Social Security Numbers with the On Line Social Security Administration System to verify the validity of Applicant Name and Social Security Number on the application.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Home Telephone

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by the consumer reporting agency named above during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at the Consumer Reporting Agency identified above in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

10/8/08