

# Nantucket Inn and Conference Center

## Application for Employment

Applicants are considered for all positions without regard to genetic information, national origin, color, religion, race, age, sex, marital or veteran status, or the presence of a non-job related medical condition or handicap.

(Please Print)

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

Position(s) Applied For: \_\_\_\_\_

Referral Source: ☐ Advertisement ☐ Friend/Relative ☐ Walk-In ☐ Other

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Number) (Street) (City) (State) (Zip Code)

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

If employed and you are under 18, can you supply us with a work permit? ☐ Yes ☐ No

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

Are you a foreign national that requires a work visa to be legally employed in this country? ☐ Yes ☐ No

What type? \_\_\_\_\_ Expiration: \_\_\_\_\_

Are you employed now? ☐ Yes ☐ No May we contact your present employer? ☐ Yes ☐ No

On what date would you be available for work? \_\_\_\_\_ End Date: \_\_\_\_\_

Are you available to work: ☐ Seasonal ☐ Part Time- AM ☐ Part Time- PM ☐ Full Time/Year Round  
M T W T F S S M T W T F S S

Have you been convicted of a felony within the last 7 years? ☐ Yes ☐ No

If yes, please explain \_\_\_\_\_

Give three references who are not related to you and are not previous employers

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

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

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

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

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

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

Summarize special skills and qualifications

### Education

	Elementary	High	College/University	Graduate/Professional
School Name				
Years Completed				
Diploma/Degree				
Course of Study				
Training/Skills				

### Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities.  
Exclude organization names which indicate race, color religion, sex or national origin.

Employer	Dates Employed		Work Performed
Address	From	To	
Job Title	Hourly Rate/Salary		
Supervisor	Start	Final	
Telephone	Reason for Leaving		

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### Agreement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and a contract of employment and that no verbal promises regarding employment are binding on the employer and that I am employed "at will" and may be terminated at any time. I understand that the employer has the right to change conditions of employment, job responsibilities and benefits at its discretion. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

I understand, also, that I am required to abide by all rules and regulations of the company.

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

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

An equal opportunity employer M/F/V/H