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:	
	(Middle)
Address: (Number) (Street) (C	City) (State) (Zip Code)
Telephone:	Cell:
Email:	
If employed and you are under 18, can you supply us with a	a work permit?
Are you legally eligible for employment in this country?	□ Yes □ No
Are you a foreign national that requires a work visa to be le What type?	
Are you employed now? ☐ Yes ☐ No May we conf	tact your present employer? □ Yes □ No
On what date would you be available for work?	End Date:
Are you available to work: ☐ Seasonal ☐ Part Time- A M T W T F S	M Part Time- PM Full Time/Year Round S M T W T F S S
Have you been convicted of a felony within the last 7 years If yes, please explain	
Give three references who are not related to you and are no	
Name: Relation	onship: Years Known:
Address:	
Name: Relation	
Address:	
Name: Relation	

Summarize special	skills	and	qua	lifica	tions	;											
Education																	
		Ele	men	tary			Н	igh		Со	llege/l	Jnive	rsity	Graduate/Professional			
School Name																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Course of Study																	
Training/Skills																	
	•																
Employer									D	ates	Emplo	yed		Wo	rk Per	formed	d
Address								<u> </u>	Dates Employed Work Performed From To				u				
Job Title								Hourly Rate/Salary									
Supervisor								St	Start Final								
Telephone									Reason for Leaving								
Employer				Dates Employed						rk Per	formed	d					
Address								Fr	om		To						
Job Title)			Hourly Rate/Salary													
Supervisor									art		Fina						
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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	
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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.