



APPLICATION FOR EMPLOYMENT

Top Paw Resort and Top Paw Resort LLC (the “Company”) is an equal opportunity employer and will not base hiring on race, color, sex, national origin, religion, disability, age, sexual orientation, or any other characteristic protected by applicable federal, state, or local law. No question on this application is used for the purpose of limiting or excluding any applicant’s consideration for employment on any basis prohibited by federal, state or local laws. It is the Company’s policy not to refuse to hire a qualified individual with a disability because of that person’s need for a reasonable accommodation as provided under the Americans with Disabilities Act or other applicable laws.

Please fill in your responses below. You must complete ALL information on this application for consideration of employment

NAME: _____ Date: _____

Available Start Date: _____

Circle One: Full Time Part Time Temporary

Phone Numbers (identify home, cell, work): _____

Social Security Number: _____

Email Address: _____

Present Address: _____

Permanent Address (if different): _____

Have you ever been employed or enrolled in school under a name other than that used on this application?

If so, please specify: _____

Ever applied to this Company before? (when): _____

Any family members work for this Company? (Who/Relation): _____

Are you legally authorized to work in the United States?: _____

Have you ever pled “guilty” or “no contest” to or been convicted of a felony within the past 7 years?:

Are you able to perform the essential functions for which you are applying with or without a reasonable accommodation?: _____

Are you presently employed?: _____ If so, may we contact your current employer?: _____

If yes, may we contact your current employer?: _____

How did you learn about our employment opportunities?: _____

EDUCATIONAL BACKGROUND

	Years Completed	Graduate?	Course of Study/Degree
High School	_____	_____	_____
College	_____	_____	_____
Other (trade/graduate)	_____	_____	_____

List any other relevant training, skills, study, research, Military Service, etc: _____

WORK EXPERIENCE (list former employers starting with most recent)

(1) Company Name: _____

Start Date: _____

End Date: _____

Company Address: _____

Company Phone Number: _____

Position: _____

Supervisor Name/Title: _____

Full or Part Time: _____

Starting Pay: _____ Ending Pay: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

2) Company Name: _____

Start Date: _____

End Date: _____

Company Address: _____

Company Phone Number: _____

Position: _____

Supervisor Name/Title: _____

Full or Part Time: _____

Starting Pay: _____ Ending Pay: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

REFERENCES

(List three professional or personal references who are not relatives. If no work history, list three school or personal references who are not relatives)

	NAME	COMPANY	CITY/STATE/PHONE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

I hereby certify that the information contained on this application, or any other information I submit to the Company in connection with my application for employment, is true and correct to the best of my knowledge and agree to have any such statements or information checked by the Company. I authorize the Company to make a thorough investigation of my references, past employment, education, criminal background, and to secure additional job-related information about me. I also authorize the references listed above, as well as all other individuals whom the Company contacts, to provide the Company with 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 Company as well as from any use or disclosure of such information by the Company or any of its agents, employees or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application, or any other information I submit to the Company in connection with my application for employment, may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment.

This application is current for only 90 days. At the conclusion of this time, if have not heard from the Company and still wish to be considered for employment, I understand that it will be necessary for me to complete a new application.

I understand that if I am hired by the Company, my employment will be "at-will" and, just as I will be free to resign at any time, the Company reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no employee or representative of the Company has any authority to enter into a contract of employment, express or implied, that changes or modifies in any way such employment at-will.

By filling in the signature box with your name, signature, & date, you agree to the terms and conditions

Signature: _____
Name: _____
Date: _____