



**EMPLOYMENT APPLICATION FORM**

*Pre-Employment Questionnaire (An Equal Opportunity Employer)*

**Personal Information:**

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street City State Zip

PHONE NO. \_\_\_\_\_ ARE YOU 18 YEARS OR OLDER? YES NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED  
 IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY? IF SO PLEASE EXPLAIN: YES NO

**Employment Desired:**

JOB TITLE: \_\_\_\_\_ SALARY DESIRED: \_\_\_\_\_

DATE YOU CAN START: \_\_\_\_\_ ARE YOU EMPLOYED NOW? \_\_\_\_\_

EVER APPLIED WITH THIS COMPANY BEFORE? \_\_\_\_\_ WHERE: \_\_\_\_\_ WHEN: \_\_\_\_\_

REFERRED BY: \_\_\_\_\_ MAY WE CHECK REFERENCES? \_\_\_\_\_

EDUCATION	SCHOOL/LOCATION	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
Grammar School				
High School				
College				
Other Schools				

**Other Information:**

ARE YOU A MEMBER OF THE US MILITARY? YES NO RANK: \_\_\_\_\_ BRANCH: \_\_\_\_\_

LIST ANY GENERAL SUBJECTS OF STUDY, RESEARCH WORK, ACTIVITIES OR SPECIAL SKILLS: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

EXCLUDE ORGANIZATIONS THAT THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, MARITAL STATUS, COLOR OR NATIONAL ORIGINS OF ITS MEMBERS

# TIMBERLINE

## HOSPITALITIES, LLC

*Wyoming Owned & Operated*

**Former Employers: List the last four employers starting with your present or most recent.**

Employer	Employers Address	Dates Employed	Position	Salary	Reason for Leaving
		From: To:		\$	
		From: To:		\$	
		From: To:		\$	
		From: To:		\$	

**References: Name 3 persons, not related to you, that you have known for at least 1 year.**

Name	Phone Number	Business	Years known

**In case of emergency, notify: \_\_\_\_\_ Phone: \_\_\_\_\_**

**I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, at the discretion of the employer, be terminated at any time without previous notice.**

**SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_**