

ARIZONA INN EMPLOYMENT APPLICATION



Last	First	Middle
Street Address		
City, State Zip		
Phone	Phone / Message	

Position Desired			
Full Time	<input type="checkbox"/>	Social Security Number	Pay Rate Desired
Part Time	<input type="checkbox"/>		
Are you of legal age to serve alcoholic beverages in this state?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you eligible to obtain any and all permits required by law?			Yes <input type="checkbox"/> No <input type="checkbox"/>

If hired, you may be required to submit proof of the above.

If you are not a citizen of the United States, do you have the legal right to remain and work in the United States?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If hired, you must submit proof of the above

Have you ever been convicted of a crime? If yes, please describe below	Yes <input type="checkbox"/>	No <input type="checkbox"/>

PREVIOUS EMPLOYMENT HISTORY

List your employers of the last seven years. List most recent employer first.

1. Employer (most recent)	
Street Address	
City, State Zip	
Phone	Supervisor
Begin Date	End Date
Duties	
Reason for Leaving	Rate of Pay

2. Employer	
Street Address	
City, State Zip	
Phone	Supervisor
Begin Date	End Date
Duties	
Reason for Leaving	Rate of Pay

3. Employer	
Street Address	
City, State Zip	
Phone	Supervisor
Begin Date	End Date
Duties	
Reason for Leaving	Rate of Pay

4. Employer	
Street Address	
City, State Zip	
Phone	Supervisor
Begin Date	End Date
Duties	
Reason for Leaving	Rate of Pay

EDUCATION

Select highest grade level completed _____ College _____ Degree _____

Name of last school attended _____

Other training or trade schools _____

If applicable to the job, which languages other than English do you speak fluently? _____

What source referred you to the Arizona Inn? _____

Have you ever worked for the Arizona Inn? If yes, Yes No
 Dept _____ From _____ To _____ Reason for Leaving _____

List names and positions of any relatives employed at the Arizona Inn _____

Are you physically able to perform the essential functions of the job for which you are applying, with or without accommodation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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UNITED STATES MILITARY SERVICE

Veteran?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Service Branch _____	Service Dates _____	
			Selective Service Class, or Reserve Status _____		

EMERGENCY CONTACT

Name _____	Address _____
Phone _____	Relationship _____

Public Law 91-508 requires that we advise you that a routine inquiry may be made during our initial or subsequent processing of your application which will provide applicable information concerning character, general reputation, personal characteristics, and mode of living. Upon written request, additional information regarding inquiry, if one is made, will be provided.

The Arizona Inn is an equal opportunity employer, and selects qualified individuals for the job based upon job related qualifications, regardless of race, creed, color, sex, national origin, or on the basis of age or handicap.

I certify that any misrepresentation made in this application will be sufficient cause for cancellation and/or for my separation from the Arizona Inn. I certify that if employed, I will abide by all company rules and regulations. I certify that the above statements have been read by me and that the statements I have made on this application are true and correct. I authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the duties of the job for which I am being considered prior to employment or in the future during my employment with the Arizona Inn.

Signature _____ Date _____

Applications accepted in person at 2200 East Elm Street, Tucson, AZ 85719, by email at hr@arizonainn.com, or by fax at (520) 881-5830

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Employee Name: _____ Date of Birth: _____

Interviewed by: _____ Date: _____

Hired: _____ Position: _____ Dept: _____

Salary: _____ Start Date: _____ FT/PT: _____

Timecard #: _____ File #: _____ Parking #: _____

Approved: _____

Employment Manager

Department Head

General Manager

ARIZONA INN

APPLICANT INFORMATION



Availability

How many hours per week are you seeking? _____

Please fill in the table below with the times you are **not** available to work

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6am							
7am							
8am							
9am							
10am							
11am							
12pm							
1pm							
2pm							
3pm							
4pm							
5pm							
6pm							
7pm							
8pm							
9pm							
10pm							
11pm – 6am							

Additional Comments
