



APPLICATION FOR EMPLOYMENT

Thank you for your interest in employment with Santa Marta. We seek applicants who are qualified, dedicated and who seek fulfilling employment. In return, Santa Marta offers competitive income, benefits and an excellent working environment.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date _____

Address _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

Are you eligible to work in the U.S? Yes No
(Proof of identity and eligibility will be required upon employment.)

Are you at least 18 years or older? Yes No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

Have you ever been convicted of a crime or violation other than a minor traffic infraction?

Yes No

(A conviction record will not necessarily bar employment. Factors such as job relatedness, age of the offense, seriousness and nature of the violation and rehabilitation will be taken into account.)

EMPLOYMENT DESIRED

Full Time Part Time On Call Weekdays Weekends

Mornings Afternoons Evenings Nights

Date you can start _____ Hourly rate/Salary desired _____

Position desired _____

Are you currently employed? _____ If so may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? Walk In Advertisement Referral Other

Have you ever worked for this company before?

Yes No Explain _____

Referred by: _____

EDUCATION and Certifications/Licenses	Name and location of school	Degree Received	Subjects studied/Major
Highest Level of Education Completed			

EMPLOYMENT HISTORY Note your most recent employment history, including periods of unemployment, starting with the most recent and working backwards in time. "See Attached Resume" is not acceptable

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

PROFESSIONAL REFERENCES

Give the names of three persons not related to you, whom you have known at least one years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Santa Marta to hire me. If I am hired, I understand that either Santa Marta or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. All employment with Santa Marta is at-will and I understand that no representative of Santa Marta has the authority to make any assurance to the contrary. I understand that company policies, procedures, practices and statements made during an interview or employment do not create an employment contract by implication or otherwise.

I attest with my signature below that I have given to Santa Marta true and complete information on this application. No requested information has been concealed. I authorize Santa Marta to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

I understand that an offer of employment is contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

AUTHORIZATION

I understand that background, drug or medical testing may be conducted on me as part of the process to determine my fitness for employment, and hereby agree to submit to such testing. I authorize all persons, schools, companies, medical practitioners, current and/or former employers, and law enforcement authorities to release any information concerning my background or test results, and hereby release any said persons, schools, companies, medical practitioners, current and/or former employers, and law enforcement authorities from any liability for any damage whatsoever for issuing this information.

By signing below, I acknowledge that I have read, understand and agree with the above statements.

Date _____ Signature _____