



# Employment Application

*Lodgic Everyday Community is an Equal Opportunity Employer and we consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status on the Federal or State level.*

## Applicant Information

Name (Last, First, MI): \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apartment/Unit #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date Available to Start: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Position Applied for: \_\_\_\_\_ Are you looking for full-time employment? Yes  No

If no, what hours are you available? Sun \_\_\_\_\_ Mon \_\_\_\_\_ Tues \_\_\_\_\_ Weds \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_

When will you be available to start work? \_\_\_\_\_

Are you legally authorized to work in the U.S.? Yes  No  *Proof of identity and employment authorization will be required upon employment.*

Have you ever worked for this company? Yes  No  If so, when? \_\_\_\_\_

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

Did You Graduate? Yes  No

College: \_\_\_\_\_ Address: \_\_\_\_\_

Did You Graduate? Yes  No  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

Did You Graduate? Yes  No  Degree: \_\_\_\_\_

## References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_



Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? Yes  No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? Yes  No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? Yes  No

## Disclaimer and Signature

The information provided in this Application for Employment is true, correct, and complete. If I am accepted for employment, any misstatement or omission of fact on this application or provided in any interview may result in my dismissal. I understand that this Application for Employment and other company documents are not contracts of employment.

I understand and agree that if I am employed, my employment is for no definite period of time and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's President.

Note to Applicant: Please note that this application is considered current for thirty (30) days. If you want to be considered for employment after this time, you must complete another Application for Employment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## LODGC KIDS CAMP APPLICANTS ONLY

### Authorization & Contingency Statement

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they have, personal or otherwise, and release the company from all liability from any damage that may result from utilization of such information. I also understand and agree that no representative of Lodgic has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I have never been convicted of any felony or misdemeanor, and there are no pending criminal charges against me. I understand that any employment offer will be contingent upon:

- Passing any and all background checks.
- Completing all required paperwork and requirements for the Department of Child and Family Services (DCFS) licensing, including the timely receipt of the educational transcripts required for the position applied for.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_