

# **Application for Employment**

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or non-job related disability.

# (Answer All Questions – Please Print)

Position(s) Applied for □ Property Maintenance	• •			
Date of Application:	//	Soc	cial Security No	
Driver's License No		St	Class:	
Name:				
Last	First		Middle	
Address:				
Street		City		Zip Code
			Phone: (	)
E-mail address				
Address for Past Three	Years			
			How	Long?
Street	City		& Zip Code	
			How	Long?
Street	City		& Zip Code	
Do you have the legal rig	nt to work in the Un	nited States?	☐ Yes ☐ No	
Can you provide pr	oof of age? $\square$ Y	es 🗆 No		
Have you worked for the	JL BAR Ranch befo	ore?   Yes	☐ No Position?	
Dates: From /	/ to	/ /	Reason for leavi	າຕາ





Are you now employed?	□ Yes □ No II ye	es, may we contact	your present employ	/er/ ⊔ Y	es 🗆 No	
Who referred you?	Tho referred you?Rate of page 1.50 Page 2.50 Page 2.50 Page 3.50 Page			y expected?		
Is there any reason you mit (as described in the attach			of the job for which y	ou have a	applied	
If yes, explain if you wish	1					
	Emplo	oyment History				
List employers starting wi history must be accounted SUPPLY ALL EMPLOY	for along with all em	ployment history.				
	<b>Employer</b>			Date		
Name:			From	То		
			Mo. Yr.	Mo.	Yr.	
Address:			Position Held			
City:	State:	Zip:	Salary/Wage			
Contact Person: Phone Number:		Reason for L	eaving			
			1			
N	Employer			Date		
Name:			From	То		
			Mo. Yr.	Mo.	Yr.	
Address:			Position Held	l		
City:	State:	Zip:	Salary/Wage			
Contact Person:	Phone Numb	per:	Reason for L	eaving		





Employer			Date		
Name:			From To		
			Mo. Yr.	Mo.	Yr.
Address:			Position Held		
City:	State:	Zip:	Salary/Wage		
Contact Person:	Phone Number:		Reason for Leaving		
	Employer		D	ate	
Name:			From	То	
			Mo. Yr.	Mo.	Yr.
Address:			Position Held		
City:	State:	Zip:	Salary/Wage		
Contact Person:	Phone Number:		Reason for Leaving		
	Employer			1949	
	Employer		μ	ate	
Name:			From	То	
			Mo. Yr.	Mo.	Yr.
Address:			Position Held	11101	111
City:	State:	Zip:	Salary/Wage		
Contact Person:	Phone Number:		Reason for Leaving		





Employer				Date		
Name:			From	То		
			Mo. Yr			
Address:			Position He	eld		
City:	State:	Zip:	Salary/Was	ge		
Contact Person:	Phone	Number:	Reason for	Leaving		
During the past two pre-employment dru	ug and alcohol test	administered by an	employer?	•		
1. How many mov	1. How many moving violations have you had in the last 3 years?					
2. Have you been o	eited for DUI/DWI	Any alcohol related	d) in the last 5 years	?		
3. Have you ever b	een convicted of a f	elony or misdemea	nor? □ Yes □	No		
4. How many vehice	cle accidents have y	ou had in the last 3	years?			
5. Has your license Accident Record for Pa		•	nded? □ Yes	□ No		
recident record for tu	Dates	Nature of	Fatalities	Injuries		
T (A : 1 (		Accident (Type)				
Last Accident						
Next Previous						
<b>Next Previous</b>						



TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)

If None, Write "None"				
Location	Da	te Char	ge/Violation	Penalty
		Ed4:		
		Education		
Circle Highest Gra	de Completed: 1	12345678 H	igh School: 123	4 College: 1 2 3 4
G	•			C
Last School Attend				
	Nam	e		City/State
	Experie	ence & Qualification	ns –Driver	
Please li		ay have held from other	states for during the p	
	State	License No.	Type/Class	<b>Expiration Date</b>
Driver License				
Driver License				
Driver License				
<b>Driver License</b>				
1. Have you ever bee	n denied a license.	permit or privilege to	operate a motor vel	nicle?
1. 114,0 904 0,01 000		permit of privilege to	operate a motor ver	— 1 <b>0</b> 5 — 110
2. Has any license, pe	ermit or privilege e	ver been suspended or	revoked?	s 🗆 No
If the	anguar to aithar "	1" or "2" is YES, attac	ah statamant siying	dataila
II tile	answer to entire	1 01 2 18 1 E.S., alla	on statement giving	details.
3. Do you have reliab	le transportation to	get to and from work	? □Yes □ N	0
<b>y</b>	1			





#### 3500 Private Road 2254 Sonora, TX 76950 TO BE READ AND SIGNED BY APPLICANT

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision will be final upon completion of a drug test/physical. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended). I hereby release employers, school, health care providers, and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the Company.

#### **Driver Notification & Release**

In connection with my application for employment with the JL Bar Ranch & Resort (including contract for services), I understand that a consumer report which may contain public record information is being requested from DAC Services. This report may include the following types of information: Names and dates of previous employers, reason for termination of employment, work experience, accidents, etc. I further understand that such report may contain public record information concerning my driving record, worker's compensation claims, credit, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records; as well as information from DAC concerning previous driving record requests made by others from such state agencies, and state provided driving records.

I authorize, without reservation, any party or agency contacted by The JL Bar Ranch & Resort or DAC to furnish the above-mentioned information.

I have the right to make a request to DAC, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information; and the recipients of any reports on me which DAC has previously furnished within the two-year period preceding my request. I hereby consent to your obtaining the above information from DAC, and I agree that such information which DAC has or obtains, and my employment history with you if I am hired, will be supplied by DAC to other companies which subscribe to DAC services.

#### **Notice of Final Employment**

Notice of final employment will be provided to each prospective employee in written format, "Letter of Employment". **No** verbal statements will constitute an express or implied contract of employment. All employment will be final upon receipt of favorable drug test results.

Applicant's Signature	
Applicant's Printed Name	
	_

