



640 S. 80 E #110, Logan, UT 84321

Tel (435) 750-5163

Fax (435) 304-6160

(Please print clearly)

Today's Date:

Position Desired				
Position applied for:			Location:	
Available to work: ___ Full time ___ Part time ___ Days ___ Evenings ___ Weekends				
On what date are you available to work? _____			Desired Pay _____	
Will you work overtime during the work week if necessary? ___ Yes ___ No				
Will you work weekend overtime if necessary? ___ Yes ___ No				
Personal Data				
Name (Last, First, MI):				
Social Security #:				
Address:				
City:		State:		Zip:
Phone:			Email Address:	
Are you a citizen of the United States? ___ Yes ___ No				
If no, are you authorized to work in the U.S.? ___ Yes ___ No				
Are you at least 16 years of age? ___ Yes ___ No				
If yes, are you at least 21 years of age? ___ Yes ___ No				
Have you filed an application for Wasatch, Elements, or Coppermill before? If yes, give date _____			___ Yes ___ No	
Have you ever worked for Wasatch, Elements, or Coppermill? If yes, please give dates of employment _____			___ Yes ___ No	
Driver's License # & State:			Expiration:	
Since your 18th birthday, have you ever been convicted of a crime? "Crime" does not include minor traffic offenses. ___ Yes ___ No				
If you answered "yes", please attach give offense(s) for which convicted, date of conviction and jurisdiction. No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.				
Did you graduate from High School or have a G.E.D. ___ Yes ___ No				
Skills Overview				
Language fluency:	Language(s):	Speak:	Read:	Write:
Please summarize relevant skills and experience that exemplify your qualifications for the position you are applying for:				

Employment History		
Current or most recent employer	Phone:	
Job Title		
Employment Dates	From:	To:
Supervisor's name/title		
Starting salary:	Present/Ending salary:	Hours per week:
Work Performed/Responsibilities		
Reason for leaving or wanting to change:		
May we contact this employer if you are considered for the position? ___Yes ___No		
<hr/>		
Employer	Phone:	
Job Title		
Employment Dates	From:	To:
Supervisor's name/title		
Starting salary:	Present/Ending salary:	Hours per week:
Work Performed/Responsibilities		
Reason for leaving or wanting to change:		
May we contact this employer if you are considered for the position? ___Yes ___No		

REFERENCES

Name _____	Phone _____
Relationship _____	Company & Title _____
Name _____	Phone _____
Relationship _____	Company & Title _____
Name _____	Phone _____
Relationship _____	Company & Title _____

Wasatch Premier Hospitality, LLC. is an equal opportunity employer. All applicants are considered for positions regardless to race, color, religion, sex, national origin, age, martial or veteran status, or the presence of a non-job related medical condition or handicap. Verification of eligibility to work in the United States will be required if an employment offer is made.

I acknowledge that consideration for employment is contingent on the results of credit, criminal, drug and background checks. I hereby authorize Wasatch Premier Hospitality (1) conduct any and all of the above; (2) investigate the truthfulness of all statements made on this application; (3) contact my former employers and other listed references or any other persons who can verify information; and (4) discuss the results of any investigation with other employees of Wasatch Premier Hospitality involved in the hiring process. In addition, I give my consent for all contacted persons including former employers to provide the information concerning this application, and I release each person from liability for providing information to the company.

I certify that the information contained in this application is correct to the best of my knowledge, and understand that falsification of this application in any detail is grounds for disqualification from further consideration or dismissal from employment in accordance with company policy.

APPLICANT SIGNATURE: _____ **Date:** _____