



Employment Application

(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS)

Our company ("Company") fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, genetic information, disability, or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans with Disabilities Act and applicable federal, state and/or local laws, it is our policy to provide reasonable accommodation upon request during the application process to applicants in order that they may be given a full and fair opportunity to be considered for employment. As an Equal Opportunity Employer, we intend to comply fully with applicable federal, state and/or local employment laws and the information requested on this application will only be used for purposes consistent with those laws. To the extent required by applicable law, The Company maintains a smoke- free workplace.

Applicants for positions in Rhode Island please note that the Company and ADP TotalSource, our Professional Employer Organization are subject to Chapters 29-38 of Title 28 of the General Laws of Rhode Island and are therefore covered by the state's workers compensation law.

Property:		
POSITION APPLIED FOR: _		DATE:
PERSONAL DATA		
Salary expectations:		-
Name:		
Last	Middle	First
Street Address:		
City:	State:	Zip Code:
Telephone:	email:	
	age, please specify your age:(
Are there any days, shifts o	r hours you will not work?* 🗌 Yes 🗆	No
If yes, please explain:		
Will you work overtime, if re	equired?* Yes No	

*Note: It is not necessary for you to identify unavailability for work because of religious observance or practice or any other protected classification. Subsequent to any job offer, we will consider whether a reasonable accommodation can be made.





When will you be able to start work?
How did you learn of the Company?
Have you ever applied or worked for the Valor Hospitality before? \square Yes \square No
If yes, provide dates:
Are you legally authorized to work in the United States? Yes No
Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)? \Box Yes \Box No
Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.
DRIVING RECORD (Answer only if driving is a requirement of the job for which you are applying).
Do you have a valid driver's license? Yes No State: License No:
Have you had any tickets? Yes No
If yes, please explain:





EDUCATION

Describe any educational degrees, skills, training or experience you believe are relevant to the job applied for:

Name, City & State of Educational Institution	Graduated		If no, Degree	Type of Degree			Grade
	Yes	No	Credits Earned	Received or Expected	Major	Minor	Point/Overall GPA
High School:							
College/ University:							
Technical/GED:							
Licenses/Certifications/Other:							

EMPLOYMENT HISTORY:

Please complete for all full-time or part-time employment beginning with most recent employer. You may include as part of your employment history any verified work performed on a volunteer basis. All applicants should start with their most recent job, include military assignments and voluntary employment and provide ten (10) years of history. (A separate sheet may be attached.) You must explain any gaps in your employment history.

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Company Name:	- A-1	Telephone:	-
Address:			_
Name of Supervisor:		May we contact: Yes No	
Dates Employed: From:	To:	Rate of Pay: Start: Last:	
State job titles and describe jol	b duties:		_
Reason for leaving:			





Company Name:	Telephone:
Address:	
	May we contact: Yes No
Dates Employed: From: To:	Rate of Pay: Start: Last:
State job titles and describe job duties:	
Reason for leaving:	
Company Name:	Telephone:
Address:	
Name of Supervisor:	May we contact: ☐ Yes ☐ No
Dates Employed: From: To:	Rate of Pay: Start: Last:
State job titles and describe job duties:	
Company Name:	Telephone:
Address:	
	May we contact: Yes No
Dates Employed: From: To:	Rate of Pay: Start: Last:
State job titles and describe job duties:	
Reason for leaving:	
Have you ever been discharged or asked to resi	an from employment? Vec No
ır yes, expidili:	





Did you receive any discipl	ine in your last 12 months of active	employment with	your previous employer?	
☐ Yes ☐ No If yes, please	e explain:			
	ance evaluation within the last 12 mo			
any other employer that m	competition or non-solicitation agree ight restrict you from working for the you are being considered for hire)?	ment or any othe e Company (you	er kind of agreement with will be required to furnish	
If yes, please explain:	27)			
PROFESSIONAL R	REFERENCES (Please list three your qualifications for this position.	individuals unrel .)	ated to you with whom	
Name	Address	Phone	Relationship	
MILITARY (Complete	only if you served in the military.)			
Branch of Service:	Num	ber of Years /Mo	nths of Service:	
Rank at Discharge;	Date of Discharge:			
Describe any military skills,	training or experience you believe a	ere relevant to the	e job you applied for:	





APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein and during the entire application process (including but not limited to any criminal record inquiries made following this application, resumes, attachments to this application, interviews or otherwise (if applicable)) are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers during the application process may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts during the application process may be cause for my dismissal at any time without prior notice.

I consent to and authorize Valor Hospitality Partners, LLC and ADP TotalSource® to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give Valor Hospitality Partners, LLC or ADP TotalSource (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party (ies) for providing a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR THE VALOR HOSPITALITY PARTNERS, LLC OR ADP TOTALSOURCE WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTES AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND VALOR HOSPITALITY PARTNERS, LLC OR ADP TOTALSOURCE. I ALSO UNDERSTAND THAT MY AT-WILL EMPLOYMENT STATUS WITH VALOR HOSPITALITY PARTNERS, LLC MAY ONLY BE ALTERED IN AN INDIVIDUAL CASE OR GENERALLY IN A WRITING SIGNED BY THE OWNER, PRESIDENT OR CEO OF THE COMPANY AND THAT MY AT-WILL STATUS WITH ADP TOTALSOURCE MAY ONLY BE ALTERED IN AN INDIVIDUAL CASE OR GENERALLY IN A WRITING SIGNED BY THE PRESIDENT OF ADP TOTALSOURCE.

I understand that I may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation or take a pre-employment drug test. If I am offered employment or start work before any required test is completed, I understand that my employment is contingent on a satisfactory result on all required tests. I authorize Valor Hospitality Partners, LLC and ADP TotalSource to release the results of background checks (if any) and my pre-employment drug/alcohol test (if any), any information on this application and any relevant information about me to each other and to other ADP TotalSource clients for whom I have applied for employment, and release Valor Hospitality Partners, LLC, ADP TotalSource and its clients from any and all claims related to the lawful release of this information. I further authorize the release of any background check results and of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document. I agree to sign any additional forms necessary for pre-employment checks and/or tests to be conducted.

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Signature		Date	