TRI-STAR HOSPITALITY, LLC

Corporate Offices 319 E. Parson St. Alpena, MI 49707 989-356-2267



Employment Application

Applic	ant Info	ormation													
Last Name				Firs	it					M.I.		Date			
Street Address										Apartment/Unit#					
City			State				Zip			•					
Phone			Email Address												
Date Available				Expected Rate of Pay											
Position	Applied	For			Are you over 18?										
Are you	a citizen	of the United Stat	es?	YES	S NO If no, are you			u authorized to work in the U.S.?							
Have you ever worked for Ludlow Enterprises?				YES		№ □	If so, when?								1
Have you ever been convicted of a felony? YES NO If yes, explain															
If hired, how long do you plan to work? Summer only 6 mon- 1 yr 1yr +															
Do you have reliable transportation?															
AVAIL	ABILITY	,													
DAY		MONDAY	TUESDAY		WEDNESDAY		TH	IURSDA	Y FRIDAY		SA	TURDAY	URDAY SUN		
TIME															
PREVIO	PREVIOUS EMPLOYMENT														
Compan	Company Phone														
Address Supervisor															
Job Title St					Starting Salary \$					Ending Salary \$					
Responsibilities															
FromTo Reason for Leaving															
May we	contact y	our previous sup	ervisor for a re	eferei	nce?	YES N	10 🗌								
Company							Phone								
Address						Supervisor									
Job Title Starting Salary \$_						Salary \$	Ending Salary \$								
Responsibilities															
From	FromTo Reason for Leaving														
May we contact your previous supervisor for a reference? YES NO															

Company		Phone								
Address		Supervisor								
Job Title	Starting Salary \$		Ending Salary \$							
Responsibilities										
FromTo	Reason for Leaving									
May we contact your previous supervisor for a reference? YES NO										
MILITARY SERVICE										
Branch	From To									
List duties in the service including any special training:										
UNDERSTANDING OF EMPLOYMENT										
Ludlow Enterprises is an at-will employer. I use employed on an at-will and indefinite base warning, for any or no reason. I hereby give usine, or saliva samples from me and to concusubstances, and I hereby release Ower from of the test results and other relevant medical for employment by Owner, I hereby consent such testing is appropriate, and acknowledge policy is a condition of my employement. I all that there are no other agreements or under this Understanding of Employment can be medical that the read and understand the information of the properties of the pr	sis and are subject to to my consent for Owner a duct any other medical any liability arising our all information to author to be tested in the above that remaining free or lso understand that this restanings, past or present adde only in writing by the above. I agree to these	ermination at any time, we through an authorized test to determin the press of such test or its results rized Owner management ove manner during my end fillegal drug use and comes is the entire agreement ent, concerning my employed the President of the Competence of the Competence of the Competence of the Management of the Competence	with or without prior notice, discipline or esting service of its choice, to collect blood, sence of alcohol, drugs, or controlled so Futher, I give my consent for the release at forappropriate review. If I am accepted inployment when, in Owner's judgment, inplying with Owner's substance abuse to between the Company and myself and byment with the company. Any change in pany. I application leads to employment, I							
understand that false or misleading information in my application or interview may result in my release.										
Signature Date										
STOP YOU HAVE COMPLETE	D YOUR APPLICATE	ION GIVE IT TO A ME	EMBER OF MANAGEMENT							

STOP YOU HAVE COMPLETED YOUR APPLICATION. GIVE IT TO A MEMBER OF MANAGEMENT. THANK YOU FOR APPLYING!

FOR MANAGEMENT USE ONLY								
Item	Excellent	Good	Fair	Poor	Comments			
Communication Skills								
Grooming								
Personality								
Potential								