

DESTINATION SERVICES CORPORATION, INC.

An Equal Opportunity Employer
 0150 East Beaver Creek Blvd.
 P.O. Box 3660
 Avon, CO 81620

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. **No action can be taken on this application until you have answered all questions.** Use blank paper if you do not have enough room on this application. PLEASE PRINT except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job Applied for _____ Today's Date _____

Are You Seeking Full-time Part-time Temporary employment? When could you start work? _____

Last Name	First Name	Middle Name	Telephone Number
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Present Mailing Address	City	State	Zip Code
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Are you 18 years of age or older? Yes No
 (If you are hired, you may be required to submit proof of age)

Social Security # (Optional) _____ If hired, can you furnish proof you are eligible to work in the U.S.? Yes No

Have you ever applied here before? Yes No If yes, when? _____

Were you ever employed here? Yes No If yes, when? _____

Have you ever been convicted of any law violation (Include any Plea of "guilty" or "no contest." Exclude minor traffic violations)? Yes No

If yes, give details: _____
 (A conviction will not necessarily disqualify an applicant for employment)

If employed, do you expect to be engaged in any additional business or employment outside of our job? Yes No

If yes, please explain: _____

For Driving Jobs: Do you have a valid driver's license? Yes No

Driver's License Number: _____ Class of License: _____ State Licensed In: _____

Have you had your driver's license suspended or revoked in the last 3 years?..... Yes No

If yes, give details: _____

List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal Race, color, religion, national origin, sex, age, disability or other protected status.) _____

LIST NAME AND ADDRESS OF SCHOOLS	Number of years completed	Diploma/Degree/Certificate	Subjects Studies
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High School of GED: _____

College or University: _____

Vocational or Technical: _____

What skills or additional training do you have that relate to the job for which you are applying? _____

What machines or equipment can you operate that relate to the job for which you are applying? _____

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firms name and supply business references. Note: A job offer may be contingent upon acceptable

references from current and former employers. Applications that state "please see resume" will be rejected. **No action can be taken on this application until you have answered all questions.**

Name of Employer:		Job Title and Duties:	
Address:		Dates of Employment (Mo/Yr): From: _____ To: _____	
City, State, Zip Code:		Pay: Start \$ _____ Final \$ _____	
Supervisor(s): _____ Telephone: _____		Reason for Looking or Leaving:	
Name of Employer:		Job Title and Duties:	
Address:		Dates of Employment (Mo/Yr): From: _____ To: _____	
City, State, Zip Code:		Pay: Start \$ _____ Final \$ _____	
Supervisor(s): _____ Telephone: _____		Reason for Leaving:	
Name of Employer:		Job Title and Duties:	
Address:		Dates of Employment (Mo/Yr): From: _____ To: _____	
City, State, Zip Code:		Pay: Start \$ _____ Final \$ _____	
Supervisor(s): _____ Telephone: _____		Reason for Leaving:	
Name of Employer:		Job Title and Duties:	
Address:		Dates of Employment (Mo/Yr): From: _____ To: _____	
City, State, Zip Code:		Pay: Start \$ _____ Final \$ _____	
Supervisor(s): _____ Telephone: _____		Reason for Leaving:	

Have you worked or attended school under any other name? Yes No

If yes, give names: _____

Are You Presently employed? Yes No

If yes, whom do you suggest we contact? _____

Have you ever been fired form a job or asked to resign? Yes No

If yes, please explain: _____

Give three references, preferably former employers, not listed as supervisors above,

Name	City, State & How Known	Phone

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions tat may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination, background or credit check. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Only the HR Manager or officer of the organization has the authority to enter into an agreement of employment for any specified period and such agreement must be in writing, signed by the designated authority and the employee. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reason and with or without notice.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____

This application for employment will remain active for a period of one year.