



Herberg, LLC  
Dba Staybridge Suites



Property Managed by:  
Lincoln Hotel Group, LLC

# Employment Application

Name \_\_\_\_\_  
Last First Middle Other Names under Which You Have Worked

Address \_\_\_\_\_  
Number and Street City State Zip Code

Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Referred By: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Telephone Number (\_\_\_\_\_) \_\_\_\_\_

Position Desired: 1. \_\_\_\_\_ 2. \_\_\_\_\_ Date Available For Work: \_\_\_\_\_

\_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary: From \_\_\_\_\_ to \_\_\_\_\_

**Check days and hours you can work:**

\_\_\_\_\_ Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday

\_\_\_\_\_ 6 a.m. to 3 p.m. \_\_\_\_\_ 2 p.m. to 11 p.m. \_\_\_\_\_ 6 p.m. to 3 a.m.

\_\_\_\_\_ 7 a.m. to 4 p.m. \_\_\_\_\_ 3 p.m. to 12 a.m. \_\_\_\_\_ 11 p.m. to 8 a.m. Are you available to work overtime?

\_\_\_\_\_ 8 a.m. to 5 p.m. \_\_\_\_\_ 5 p.m. to 2 a.m. \_\_\_\_\_ 12 a.m. to 9 a.m.  Yes  No

Do you wish to advise us of your salary expectations? From \$ \_\_\_\_\_ to \$ \_\_\_\_\_

Are you legally entitled to work in the U.S. for any employer and could you provide proof upon offer of employment?  Yes  No

Some positions involve the handling and/or service of alcoholic beverages; therefore, could you provide proof of age if asked to do so?  Yes  No

If hired for a position requiring the operation of hotel or guest vehicles, could you provide?

a. a valid [STATE \_\_\_\_\_], "Class \_\_\_\_" driver's license?  Yes  No

b. [STATE] driving record? \_\_\_\_\_  Yes  No

Have you ever been convicted of a crime, other than a minor traffic violation?  Yes  No

If yes, please provide information regarding the nature of the offense (Note: a conviction will not necessarily bar you from employment.):

\_\_\_\_\_  
\_\_\_\_\_

Please list any additional skills or training that you have received that is directly related to the position you are applying.  
\_\_\_\_\_  
\_\_\_\_\_

EDUCATION	Name of School City and State	Diploma / Degree	Major / Course Concentration
High School		Diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED	
College		Degree? <input type="checkbox"/> Yes Type _____ <input type="checkbox"/> No Last Year Completed _____	
Other		Degree? <input type="checkbox"/> Yes Type _____ <input type="checkbox"/> No Last Year Completed _____	

EMPLOYMENT RECORD – Please start with most recent employer; include military service.

Name of Employer: _____ Address: _____ Name of Immediate Supervisor: _____ Your Title and Duties: _____ _____ Reason for Leaving: _____	Telephone (____) _____ _____ Title: _____ _____ Salary/Wage: _____ Employed From: _____ to: _____ Date Date
If you are currently employed, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Employer: _____ Address: _____ Name of Immediate Supervisor: _____ Your Title and Duties: _____ _____ Reason for Leaving: _____	Telephone (____) _____ _____ Title: _____ _____ Salary/Wage: _____ Employed From: _____ to: _____ Date Date
If you are currently employed, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Employer: _____ Address: _____ Name of Immediate Supervisor: _____ Your Title and Duties: _____ _____ Reason for Leaving: _____	Telephone (____) _____ _____ Title: _____ _____ Salary/Wage: _____ Employed From: _____ to: _____ Date Date
If you are currently employed, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Employer: _____ Address: _____ Name of Immediate Supervisor: _____ Your Title and Duties: _____ _____ Reason for Leaving: _____	Telephone (____) _____ _____ Title: _____ _____ Salary/Wage: _____ Employed From: _____ to: _____ Date Date
If you are currently employed, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

If you smoke, please be advised that you will be able to smoke only in a designated area during authorized periods.  
 Can you comply with this policy?  Yes  No

Have you ever worked for a hotel or other business managed by Lincoln Hotel Group, LLC?  Yes  No  
 If yes, indicate years worked and location \_\_\_\_\_

Applicants may be required to undergo a drug screening as a condition of employment. A positive test result will make applicant ineligible for employment. Successfully passing a drug test does not guarantee employment or job availability.

**Important: Read Carefully** I certify that the information given by me to Lincoln Hotel Group, LLC is true and complete to the best of my knowledge. I understand that, if I am employed, the discovery that I gave false or misleading information or that I omitted any material information may result in my immediate dismissal. I authorize Lincoln Hotel Group, LLC to solicit information regarding my character, general reputation, credit and financial history, previous employment and similar background information from third parties, and to contact any and all references I have on my application. I hereby release all parties and persons connected with such request for information from all liability and damages arising out of the furnishing of such information. If employed, I release Lincoln Hotel Group, LLC from any liability for future references it may provide regarding my work history at the company. ***In consideration of my employment, I agree to conform to the rules and regulations of Lincoln Hotel Group, LLC. I understand that my employment (and the terms and benefits provided or paid to me) is not intended to, and does not, constitute a contractual relationship. I also understand that, as a matter of Lincoln Hotel Group, LLC, every aspect of my employment relationship with Lincoln Hotel Group, LLC is on an at-will basis, meaning that I or Lincoln Hotel Group, LLC may terminate my employment at any time, for any reason, with or without cause. As part of this at-will policy, I understand that Lincoln Hotel Group, LLC expressly reserves its inherent authority to manage and control the business enterprise and to exercise its sole discretion to determine all issues pertaining to my employment, including all matters pertaining to promotion, job assignment, the size of the workforce, demotion, transfer and discipline. I further understand that no supervisor or manager of Lincoln Hotel Group, LLC has any authority to enter into any agreement for employment, written or verbal, or to make any agreement contrary to the foregoing, except in writing by the Vice President, Human Resources or the General Manager of the Hotel and me.***

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

EQUAL OPPORTUNITY EMPLOYER



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Dba Staybridge Suites



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Lincoln Hotel Group, LLC

## EMPLOYMENT REFERENCE RELEASE FORM

To Whom It May Concern:

I have filed an APPLICATION FOR EMPLOYMENT with Lincoln Hotel Group, LLC and I hereby request that you release to Lincoln Hotel Group, LLC any and all information along with comments and opinions that you may have relating to the Undersigned as an Employee, Student, or Otherwise. In consideration, I do hereby release the Person and/or the Company or Institution or Agency of any and all claims for damage and/or liability in the connection with the providing of this information.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_