



Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Desired Salary: \$ _____ Desired Employment: Full Time Part Time Both

Are you willing to work weekends or holidays? Yes No Are you able to pass a pre-employment drug screen? Yes No

Position Applying for: _____

How did you hear about this position? UnderWater World Website Social Media Indeed Hire Guam Newspaper
 Word of Mouth State Agency School: _____ Staff Member _____
 Other _____

Are you authorized to work in the United States? Yes No

Have you ever worked for this company? Yes No If yes, when? _____

Have you ever been convicted of a crime which would have a substantial relationship to the function and responsibilities of the position for which you are applying for? Yes No

You will not be eliminated from consideration unless such conviction is determined to have a substantial relationship to the functions and responsibilities of the position for which you are applying.

If yes, explain: _____

Previous Employment

Company: _____ Phone: _____ Starting Salary: \$ _____

Address: _____ Supervisor: _____ Ending Salary: \$ _____

Job Title: _____ From: _____ To: _____ Reason for Leaving: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone: _____ Starting Salary: \$ _____

Address: _____ Supervisor: _____ Ending Salary: \$ _____

Job Title: _____ From: _____ To: _____ Reason for Leaving: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone: _____ Starting Salary: \$ _____

Address: _____ Supervisor: _____ Ending Salary: \$ _____

Job Title: _____ From: _____ To: _____ Reason for Leaving: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes No



Education

High School: _____ Address: _____

Years Complete: 1 2 3 4 Did you graduate? Yes No Awards/Activities: _____

College: _____ Address: _____

Years Complete: 1 2 3 4 Did you graduate? Yes No Area of Study: _____

Awards/Activities: _____

Other: _____ Address: _____

Years Complete: 1 2 3 4 Did you graduate? Yes No Area of Study: _____

Awards/Activities: _____

Languages, Skills, and Other Activities

Language: _____ Speak? Yes No Write? Yes No

Language: _____ Speak? Yes No Write? Yes No

Language: _____ Speak? Yes No Write? Yes No

Driver's License? Yes No License Type: A B C D E F G Other _____

Please describe the skills you would bring to the job.

Other Skills: _____

Please describe other groups, honors, activities, or experiences which you feel would contribute to the position for which you are applying:

References

Please list three professional references.

Full Name: _____ Relationship: _____

Title: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Title: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Title: _____ Phone: _____

Address: _____



Availability and Schedule

Our normal business hours are from 10 a.m. to 11 p.m. every day but employees are expected to arrive earlier and later than these hours for preparation purposes depending on the position.

Please complete the chart below indicating the days and times that you are available and unavailable to work. Please note that days off will be assigned according to the business' needs.

Day Available:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time you are available to work	<input type="checkbox"/> Morn-Aft <input type="checkbox"/> Aft-Eve. <input type="checkbox"/> Anytime	<input type="checkbox"/> Morn-Aft <input type="checkbox"/> Aft-Eve. <input type="checkbox"/> Anytime	<input type="checkbox"/> Morn-Aft <input type="checkbox"/> Aft-Eve. <input type="checkbox"/> Anytime	<input type="checkbox"/> Morn-Aft <input type="checkbox"/> Aft-Eve. <input type="checkbox"/> Anytime	<input type="checkbox"/> Morn-Aft <input type="checkbox"/> Aft-Eve. <input type="checkbox"/> Anytime	<input type="checkbox"/> Morn-Aft <input type="checkbox"/> Aft-Eve. <input type="checkbox"/> Anytime	<input type="checkbox"/> Morn-Aft <input type="checkbox"/> Aft-Eve. <input type="checkbox"/> Anytime
If you are not available on a day, please give the reason why							

Disclaimer and Signature

Tumon Aquarium, LLC. dba UnderWater World and Sea Grill Restaurant is an equal opportunity employer and does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Tumon Aquarium, LLC. dba UnderWater World and Sea Grill Restaurant to hire me. If I am hired, I understand that either Tumon Aquarium, LLC. dba UnderWater World and Sea Grill Restaurant or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Tumon Aquarium, LLC. dba UnderWater World and Sea Grill Restaurant, other than the President and CEO, has the authority to make any assurances to the contrary.

I attest, with my signature below, that I have given Tumon Aquarium, LLC. dba UnderWater World and Sea Grill Restaurant true and complete information on this application. No requested information has been concealed. I authorize Tumon Aquarium, LLC. dba UnderWater World and Sea Grill Restaurant to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

I also understand that any offer of employment by Tumon Aquarium, LLC. dba UnderWater World and Sea Grill Restaurant is contingent upon the successful completion of a drug screening test and a police/court clearance.

Signature: _____

Printed Name: _____

Date: _____