

Please Read and Acknowledge The Following

If an offer of employment is made, I understand that prior to, and during my employment, I may be required by the Company to take and pass a medical examination, and I hereby voluntarily consent to any such examination when requested by the Company.

I authorize and request all of my present and former employers, school authorities, references, and other individuals and entities, to give information concerning me, whether or not it is on its records, and I release them and their companies, and the Company from any liability whatsoever arising from furnishing the requested information. I also authorize the Company to give information concerning me, whether or not it is on their records, to prospective employers in the future, and release the Company and its employees from any liability whatsoever in this regard.

I certify that all statements given on this application are correct and complete and realize that falsification or misrepresentation, including omission, on this or any other personnel record, or in the hiring process, may be grounds for refusal of employment, or if hired, may lead to disciplinary action, up to and including termination.

If hired, I agree to conform to all present and subsequently issued policies, rules, procedures, and regulations of the Company.

In the event of employment, and in consideration thereof, the Company and any person or entity it may authorize, will be entitled, without further consent, to copyright, sell, or use in any manner, any picture of photograph or other likeness of me (including still, video, or motion picture), or recording of my voice.

Employment is subject to the satisfactory completion of a reference check and a background check.

Signature

Date

Thank you for your interest!



Employment Application

Please complete this application in its entirety, even if you submit a resume. Your completed application will be maintained in our active files for twelve (12) months from the date received.

Please omit any information revealing your age, sex, race, religion or national origin, as it is the policy of Biloxi Lodging, LLC d/b/a Margaritaville Resort Biloxi (the Company) to provide equal opportunity for all employees and applicants for employment without regard to race, religion, color, gender, sexual orientation, gender identity, national origin, age, marital status, covered veteran status, a mental or physical disability, pregnancy, genetic information, or any other basis prohibited by local, state or federal law. This policy extends, but is not limited to, recruitment and employment, promotion, demotion, transfer, layoff, termination, rate of pay and other forms of compensation, education, and training.

Name (Last, First, Middle Initial)	Date	Email Address
Address (Street, City, State, Zip Code)		Daytime Phone
		Evening Phone
Mailing Address (If Different), Street, City, State, Zip Code		

Employment Interest				
For which position are you applying? (Please indicate your first and/or second choices by marking in the box below)				
<input type="checkbox"/> Bartender	<input type="checkbox"/> Server	<input type="checkbox"/> Line Cook	<input type="checkbox"/> Retail	<input type="checkbox"/> Front Desk Agent
<input type="checkbox"/> Barback	<input type="checkbox"/> Host	<input type="checkbox"/> Prep Cook	<input type="checkbox"/> Barista	<input type="checkbox"/> Night Auditor
<input type="checkbox"/> Busser	<input type="checkbox"/> Cashier	<input type="checkbox"/> Steward	<input type="checkbox"/> Management	<input type="checkbox"/> Security
Starting Salary/Wage Expected?		Are you willing to relocate?	When will you be available for work?	Will you be able to work Holidays?
\$ Per		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
How were you referred?				
<input type="checkbox"/> Agency <input type="checkbox"/> College/University <input type="checkbox"/> Internet Site				
<input type="checkbox"/> Newspaper <input type="checkbox"/> Radio <input type="checkbox"/> Other				
<input type="checkbox"/> Staff Member: _____				
Many of our locations are open every day of the year. What shifts will you be available to work?				
Days	Availability			
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				
Have you ever been employed by Margaritaville Enterprises, LLC or any of its affiliated companies?			If Yes, When?	Where?
<input type="checkbox"/> Yes <input type="checkbox"/> No				
Have you ever submitted an application to Margaritaville Enterprises, LLC or any of its affiliated companies?			If Yes, When?	Where?
<input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you have any relatives or acquaintances employed by Margaritaville Enterprises, LLC or any of its affiliated companies?			If Yes, Name?	Where?
<input type="checkbox"/> Yes <input type="checkbox"/> No				

Personal Data
In accordance with the Immigration Reform and Control Act of 1986, any offer of employment is conditioned upon satisfactory proof of applicant’s identity and legal ability to work in the United States. Can you submit verification of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No Visa Type:
If you are under 18 years of age, hire is subject to verification that you are of minimum legal age. If applicable, can you submit a work permit if hired? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Over 18 years
Are you legally able to serve alcohol? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any contractual restrictions which would prevent your acceptance of employment with the Company? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Pleases explain:
Have you ever been convicted of, or pleaded guilty or nolo contendere (no contest) to, a crime (felony or misdemeanor) other than a minor traffic violation? NOTE: A DUI is NOT a minor traffic violation. A “yes” response will not necessarily disqualify an applicant from employment. Failure to answer this question accurately could cause denial of employment or termination of employment* <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where: If you are unsure of how to answer this question, please check the following box and discuss this with your interviewer during your interview. <input type="checkbox"/> Yes, I wish to discuss

***DO NOT RESPOND TO THIS INQUIRY UNTIL YOU HAVE BEEN GIVEN A CONDITIONAL OFFER OF EMPLOYMENT. IF YOU ARE REQUIRED TO RESPOND, PLEASE LIMIT YOUR RESPONSES TO CRIMES FOR WHICH YOU WERE CONVICTED WITHIN THE PAST 10 YEARS, EXCLUDING PERIODS OF INCARCERATION.**

Educational History					
School	Name of School	Location of School (City and State)	Major (Area of Concentration)	Level Completed	Degree, Certificate or License Received
High School					
Community College/Trade					
College/University					
Graduate					
Other Training/Certificates/ Licenses					

Employment History	
Even if you submit a resume, please list your work experience for the past 10 years below, beginning with your present or most recent employer. Please account for all time including periods of unemployment, military service, part-time, or voluntary experience.	
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, please explain:
Have you ever been discharged or asked to resign from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain:

1. Present or Most Recent Employer	From Mo/Yr	To Mo/Yr	Job Title- Start
Address	Starting Salary/Wage Per:		Job Title- Present/Termination
City State Zip Code			Reason for Leaving or Wanting to Leave:
Name of Immediate Supervisor Telephone	Present/Ending Salary/Wage Per:		Major Responsibilities:
Supervisor’s Title Department			

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Employment History cont.				
2. Employer Prior to Number 1	Period of Unemployment	From Mo/Yr	To Mo/Yr	Job Title- Start
Address		Starting Salary/Wage Per:		Job Title- Termination
City State Zip Code				Reason for Leaving or Wanting to Leave:
Name of Immediate Supervisor Telephone		Ending Salary/Wage Per:		Major Responsibilities:
Supervisor’s Title Department				

3. Employer Prior to Number 2	Period of Unemployment	From Mo/Yr	To Mo/Yr	Job Title- Start
Address		Starting Salary/Wage Per:		Job Title- Termination
City State Zip Code				Reason for Leaving or Wanting to Leave:
Name of Immediate Supervisor Telephone		Ending Salary/Wage Per:		Major Responsibilities:
Supervisor’s Title Department				

4. Employer Prior to Number 3	Period of Unemployment	From Mo/Yr	To Mo/Yr	Job Title- Start
Address		Starting Salary/Wage Per:		Job Title- Termination
City State Zip Code				Reason for Leaving or Wanting to Leave:
Name of Immediate Supervisor Telephone		Ending Salary/Wage Per:		Major Responsibilities:
Supervisor’s Title Department				

5. Employer Prior to Number 4	Period of Unemployment	From Mo/Yr	To Mo/Yr	Job Title- Start
Address		Starting Salary/Wage Per:		Job Title- Termination
City State Zip Code				Reason for Leaving or Wanting to Leave:
Name or Immediate Supervisor Telephone		Ending Salary/Wage Per:		Major Responsibilities:
Supervisor’s Title Department				

Business References			
Name	Occupation	Mailing Address	Telephone

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