

505 14th Street, Suite #900 Oakland, CA 94612 Main: (510) 628-4400 Reservations: (800) 677-1500 Fax: (510) 628-9025 https://www.topazservices.com

Please complete entire application to ensure processing.

TOPAZ SERVICES: By submitting this application, I am requesting that I be considered for employment by Topaz Services, LLC.

Position Applying for:

Topaz Services, LLC is an equal opportunity Employer.

Today's Date:

| 4 | | | | | | | | |
|---|-------------------------------|---|----------|---------------------------|---------------------|-------------|--|--|
| PERSONAL INFORMATION (Please print) | | | | | | | | |
| Name: First | MI | Last | | Daytime Phone | | | | |
| | | | | | Hourly Wa | ge Required | | |
| Address (Street a | and Number) | | Apt # | Evening Phone | | | | |
| | | | | | | | | |
| City | | State | Zip Code | Email Address | Date you ca | an start | | |
| | | | | | | | | |
| | | | | | | | | |
| EMERGENCY C | CONTACT (P | 'lease print) | | | | | | |
| Name: First and | Name: First and Last Relation | | onship | Address (Street and | d Number) | Apt # | | |
| | | | | | | | | |
| Contact Phone | Contact Phone Contact Email | | | City | State | Zip Code | | |
| | | | | | | | | |
| | | | | | | | | |
| EMPLOYMENT | | | | | | | | |
| | | ion, please keep in min Standard Time) you are | | bility of hours may vary) | | | | |
| | | to work during those ti | | IK Cach day. | | | | |
| Sunday | Monday | Tuesday | W | Vednesday Thur | rsday Friday | Saturday | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Are you able to wor | k overtime? | | |
| | | | | | | | | |
| | | | | | | | | |
| WORK FROM HOME REQUIREMENTS If you wish to be considered for telecommuting, please confirm that you have all of the following work from home requirements: | | | | | | | | |
| | | nternet with a cor | | | | | | |
| 2. Able to plug directly to your internet router through a hardwired connection3. A quiet place in your home where you will work from which is free from Do you have all of the following? | | | | | | | | |
| noise and distractions | | | | | | | | |

| EDUCATION High Sc | hool Vocational/ | Technical Co | ollege/University | Graduate/Professional | | | |
|--|------------------|--------------|-------------------|-----------------------|--|--|--|
| School Name | | | | | | | |
| City and State | | | | | | | |
| Select Last Year | | | | | | | |
| Completed | | | | | | | |
| Did You Graduate? | | | | | | | |
| Year of Graduation | | | | | | | |
| Type of | | | | | | | |
| Diploma/Degree and Major | | | | | | | |
| | | | | | | | |
| ABILITY TO WORK | | | | | | | |
| Can you submit verification of eligibility to work in the U.S.? Yes No | | | | | | | |
| Are there limitations (i.e. physical or other) that would affect your ability to work? Yes No | | | | | | | |
| If so, please specify | | | | | | | |
| | | | | | | | |
| Do you have any commitment (personal, school, or other) that would affect your work schedule? Yes No If so, please specify | | | | | | | |
| n so, prease speeny | | | | | | | |
| Are there any hours during the day or night, or any day of the week that you cannot work? | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| LIFE EXPERIENCE | | | | | | | |
| What skills, experiences, or qualifications will be an asset in your work at Topaz? | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Please describe a work situation that has been difficult for you and how you dealt with it. | | | | | | | |
| These deserves a work should on that has been difficult for you and now you doubt while it. | | | | | | | |
| | | | | | | | |
| | | | | | | | |

What has been your most interesting work and why?

Include any information about yourself that you would like considered with this application.

| EMPLOYMENT EXPERIENCE List below current and last three employers, starting with the most recent one first. Please include any non-paid/volunteer experience that is related to the job for which you are applying. Please complete even if you attach a resume. | | | | | | | |
|---|--------------------|------------------|----------|---------------------------|--|--|--|
| Employer Name | Position | Duties Performed | | | | | |
| Employer Address | Phone Number | | | | | | |
| | Supervisor Name | | | | | | |
| Type of Business | Reason for Leaving | Start Date | End Date | May We Contact? Yes No | | | |
| Employer Name | Position | Duties Performed | | | | | |
| Employer Address | Phone Number | | | | | | |
| | Supervisor Name | | | | | | |
| Type of Business | Reason for Leaving | Start Date | End Date | May We Contact? Yes No | | | |
| Employer Name | Position | Duties Performed | | | | | |
| Employer Address | Phone Number | | | | | | |
| | Supervisor Name | | | | | | |
| Type of Business | Reason for Leaving | Start Date | End Date | May We Contact? Yes No | | | |
| Employer Name | Position | Duties Performed | | | | | |
| Employer Address | Phone Number | | | | | | |
| | Supervisor Name | | | | | | |
| Type of Business | Reason for Leaving | Start Date | End Date | May We Contact? Yes No | | | |
| | | | | | | | |
| Have you ever been discharged or forced to resign from employment? Yes No NOTE: Do not include business closures or general layoffs. If you check "Yes" please provide details: | | | | | | | |
| Have you ever been convicted for violation of the law other than minor traffic offenses? Yes No NOTE: A conviction record will not always be considered grounds for disqualification, but will be weighed relative to the position being sought. | | | | | | | |
| If yes, state the nature of the offense(s), city, state and disposition: | | | | | | | |

APPLICANT STATEMENT

- I. I hereby affirm that the information I have provided in this application, employment history attachment and the accompanying resume, if any, is true and complete to the best of my knowledge. I understand that any falsified, misrepresented, incomplete or omitted information may disqualify me from consideration for employment or result in my dismissal from employment.
- II. I understand that nothing contained in this employment application, or in granting an interview, is intended to create an express or implied employment contract between Topaz Hotel Services and myself. No promises regarding employment or duration of employment have been made to me.
- III. I authorize Topaz Hotel Services or its representatives to investigate and verify any and all of the information contained in this employment application, and to conduct a criminal background investigation. I also authorize all previous employers, schools, organizations and individuals listed herein to verify any and all information I have provided and to give any additional information in response to reference questions intended to determine my suitability for employment.

Please sign below if you agree with the above statements and that all information you have entered on this application is truthful an accurate, and that no information has been omitted that would materially affect your work performance if hired by our company.

Signature:

Date:

Additional Comments: