



4703 Centennial Blvd
Colorado Springs, CO 80919
719-602-6081

info@CatagoniaCatHotel.com
www.CatagoniaCatHotel.com

Application for Employment

Catagonia Cat Hotel, Ltd. provides equal opportunity in all areas of employment and does not discriminate against any individual regardless of race, religion, sex, age, disability, sexual orientation, gender identification, veteran status, national origin, or any other protected classes.

PERSONAL

Full Name: Date:

Have you ever worked using any other name? Yes No

If yes, identify name(s) and relevant date(s):

Current Address:

Phone: Email:

LEGAL

1. Are you age 18 or over? Yes No
2. Are you legally able to work in this country? Yes No
3. Have you ever been convicted of a crime other than a minor traffic violation?
 Yes No If yes, please explain offense and final disposition:

*The existence of a criminal record will not automatically disqualify you from the job for which you are applying.

4. Do you have a valid driver's license? Yes No
5. If the position includes Cat Shuttle driving, do you consent to having your motor vehicle record (MVR) pulled for us to make a hiring decision? Yes No
6. We do not permit smoking while on duty, or drug/alcohol abuse before or during work. Are you willing to comply? Yes No

POSITION

1. Position or type of employment desired:
2. Wage desired:
3. Available: Part time Temporary Full time
4. Date available for work:
5. Minimum number of hours per week required:
6. Number of hours per week desired:

AVAILABILITY

We are staffed 7am to 6pm Mon-Sat, and from 7am- 8pm Sundays. Indicate "From" and "To" hours of your availability below. If you have separate blocks of available time, separate with a semicolon.

Available Hours

Mon

Tue

Wed

Thu

Fri

Sat

Sun

EDUCATION

1. Please list the highest level of education completed (school name & if applicable, degree or diploma)

2. Please list any vocational schools (Vet Tech, Vet Assistant, etc.) completed.

3. Are you a military veteran? Yes No Branch of service/job:

Have you ever been suspended or discharged for cause from employment?

Yes No If yes, please explain:

WORK EXPERIENCE

May we contact your current employer? Yes No Not applicable

Please list your last three employers, starting with the current or most recent:

Employer 1: Dates Employed:

Position: Final Salary:

Supervisor Name: Supervisor Phone:

Employer 2: Dates Employed:

Position: Final Salary:

Supervisor Name: Supervisor Phone:

Employer 3: Dates Employed:

Position: Final Salary:

Supervisor Name: Supervisor Phone: