



Lakeview Drive Inn
610 East Sarnia Street
Winona, MN 55987
(507) 454-3723

Applicant Information

Full Name: _____ Birthdate: _____
Last First Mi

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Position Applied for: _____

Availability

Please circle months you're available: March April May June July August September

Hours available:

	Monday.	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

Are you involved in band, plays, sports,
 another job, etc.? YES NO

If hired, do you need an extended period of
 time off to accommodate sports, band,
 vacations, etc.? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list two references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: _____ Date: _____