



Application for Employment

Complete all applicable fields, then print this form. Send the form by fax to Bucuti Beach Resort at FAX 297-582-5272, or by postal mail to Bucuti Beach Resort featuring Tara Beach Suites & Spa P.O. Box 1347 Aruba, Dutch Caribbean (Postal mail will delay your application by at least 20 days).

Position applied for: _____

Salary desired: _____

Date available: _____

Full legal name: _____

Address: _____

Home phone: _____ Business phone: _____

Birth date: _____ Birth place: _____ Nationality: _____

Age: _____ Gender: _____ Email address: _____

If you are not a citizen of Aruba, are you eligible to work on Aruba and would you be able to provide the necessary documents of proof of legal right to work upon hire? _____

How were you referred to Bucuti?

- Bucuti website Ad in newspaper Labor Dept. Employee referral Other

EDUCATION

Name and location of institution: _____ Degree received: _____

1. _____

2. _____

3. _____

Have you ever been convicted of a felony: Yes No

If yes please give date, place, and offence: _____

Have you interviewed for another position at Bucuti Beach Resort? Yes No

If so when? _____

WORK EXPERIENCE

Job title: _____

Duties: _____

Number of employees you supervised: _____

Last salary: _____ Employed from: _____ to _____

Full-time or Part-time: _____

Reason for leaving: _____

Employer: _____ Type of business: _____

Phone: _____ Address: _____

Immediate Supervisor: _____ Title: _____

Job title: _____

Duties: _____

Number of employees you supervised: _____

Last salary: _____ Employed from: _____ to _____

Full-time or Part-time: _____

Reason for leaving: _____

Employer: _____ Type of business: _____

Phone: _____ Address: _____

Immediate Supervisor: _____ Title: _____

I declare the above to be accurate and true statement of facts. If I am accepted for employment I agree to abide by all company rules and regulations governing the conduct of its associates. I agree that my employment is subject to satisfactory replies from my references. I furthermore agree that any false information above will result in my immediate disqualification from work:

X Signature: _____ Date: _____

OFFICE USE ONLY	
Interviewed by: _____	Starting Date: _____
Department: _____	Position: _____
Salary Afl. _____	
Comments: _____	

