



31943 Agoura Road  
Westlake Village, CA 91361  
PHONE 818-889-0230  
FAX 818-889-4815

*An Equal Opportunity Employer*

## *Application for Employment*

**REFERENCES:** We are concerned about bias in the workplace, violence in the workplace, falsified applications, and employee theft. By signing this application, you authorize us to conduct a personal background check and authorize others to provide us with information that is personal and confidential.

Position Applied For:		Date:		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp.
First Name:		Last Name		
Address:		City:	State:	Zip:
Home Telephone:	Current Work Telephone:	Social Security No.:		

### *Education & Training*

School	Name & Address	No. Years Completed	Did you Graduate	Degree/ Diploma
High School				
College/ University				
Vocational/ Business				

### *Employment/Work Experience*

Please list below all present and past employment for the last 10 years, starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

Dates Employed From      To		Company Name, Address, Telephone, & Supervisor	Positions Held	Reason for leaving

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Describe any training, skills and certificates received relevant to the position for which you are applying:

## ***Background***

Please answer each of the following questions

- ☐ **Yes** ☐ **No** Have you worked for either Westlake Properties, Inc. (DBA: Westlake Village Inn or Sailview Associates, Inc (DBA: Le Café, Mediterraneo, Bogies Bar and Provence) in the past?  
Company Name: \_\_\_\_\_ Dates Employed : From: \_\_\_\_\_ To: \_\_\_\_\_
- ☐ **Yes** ☐ **No** Were you referred by anyone? If yes, by whom? \_\_\_\_\_  
How did you hear about possible openings at this Company? \_\_\_\_\_
- ☐ **Yes** ☐ **No** Can you meet the language speaking requirement for this job? Language: \_\_\_\_\_
- ☐ **Yes** ☐ **No** Do you have any family members who are currently employed by Westlake Village Inn or Sailview Associates, Inc., if so what are their names: \_\_\_\_\_
- ☐ **Yes** ☐ **No** If employed, would you be in a supervisory relationship to any relative? \_\_\_\_\_
- ☐ **Yes** ☐ **No** If you are under 18 years of age can you submit a work permit if employed?
- ☐ **Yes** ☐ **No** If employed, can you submit proof of citizenship or authorization to work in the United States?
- ☐ **Yes** ☐ **No** Are you able to perform the essential functions of the job for which you are applying ? If no, describe the functions you cannot perform: \_\_\_\_\_
- ☐ **Yes** ☐ **No** Has your drivers license been suspended? If yes, Date suspended: \_\_\_\_\_  
Reason for suspension? \_\_\_\_\_
- ☐ **Yes** ☐ **No** Are you presently out on bail or recognizance for the alleged commission of any felony ? If yes, please explain  
If yes, please explain: \_\_\_\_\_  
(Felony or misdemeanor convictions, or affirmative answer above, will not necessarily disqualify an applicant from employment. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

## ***References***

Please provide us with at least three references of people who have know you but are not related to you.

Name:	Phone Number:	Address:

# WESTLAKE VILLAGE INN

HOTEL | RESTAURANT | LOUNGE | WINERY

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To aid us in checking records and to verify prior employment and education, please indicate whether you were ever employed, or enrolled in a school under a name other than that used on the application. If yes, please specify the name you were employed under: \_\_\_\_\_

I hereby certify that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by the company unless I have indicated to the contrary. I authorize the references listed above, as well as all other individuals whom the company contacts, to provide the company and all information concerning my previous employment, education and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the company as well as from any use or disclosure of such information by the company or its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment.

**In consideration of my employment, I agree to conform to the rules and standards of the Company. I further agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or at the option of the Company. I understand that no employee or representative of the Company, other than its president, has the authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing. Further, the president of the company may not alter the at-will nature of the employment relationship unless the president and I both sign a written agreement that clearly and expressly specifies the intent to do so. I agree that this constitutes an integrated agreement with respect to the at-will nature of my employment relationship, that it is final and fully binding, and that there are no oral or collateral agreements regarding this issue.**

I understand that, if offered employment, I will be required to sign an agreement requiring me to arbitrate almost all claims I might have against the Company in the future. I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the Company, that all disputes that might arise out of my hire, employment or termination by the Company, whether during or after the employment, that cannot be resolved by informal internal resolution, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules as further explained in the Westlake Villare Inn/Sailview Associates Arbitration Agreement I will receive if offered employment.

I also understand that all offers of employment are conditioned on the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States, as well as the satisfactory completion of a post-offer drug screening.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



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## PRE-EMPLOYMENT INFORMATION FORM

This Company is an equal opportunity employer and is committed to equal opportunity in employment. We are proud of the diversity of our many fine employees. To successfully maintain that program, the Company requests that you provide the following information for equal opportunity / affirmative action record keeping and reporting purposes. This information will not be considered in the employment decision. The completion of this form is voluntary.

First Name:	Middle Name:	Last Name:
Position Applied For:		Social Security No.:

**Check one**

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White	<input type="checkbox"/>
Black	<input type="checkbox"/>
Hispanic	<input type="checkbox"/>
Asian or Pacific Islander	<input type="checkbox"/>
American Indian or Alaskan Native	<input type="checkbox"/>

**Check one**

√

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>

Signature:	Date:
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