



Employment Application

Date: _____

1. Position applied for: _____

2. Name: _____
(Last) (First) (Middle)

3. Mailing Address: _____ Email: _____
Telephone: _____

4. Date of Birth (dd/mm/yy): _____ Male Female
Marital Status: _____ Number of dependants: _____

5. Country of citizenship: _____
If not a citizen of the Cayman Islands, do you hold Caymanian status ?
 Yes (please attach a copy of your status)
 No

6. Are you a resident of the Cayman Islands with the right to work?
 Yes (please attach a copy of the documentation)
 No

7. Driver's Licence No.: _____ Group(s): _____ Expiry Date (dd/mm/yy): _____

8. Date available for work (dd/mm/yy): _____

9. Starting wages desired: \$ _____

10. Have you lost more than five (5) working days through illness in the past 12 months? Yes No
If yes, give brief details:

11. CUC must provide 24 hour-a-day service to its customers. Many jobs require employees to occasionally work overtime, weekends and holidays. Are you willing to work whatever schedule is necessary to help us meet our corporate objectives and obligations to customers? Yes No

12. In case of an accident or emergency, please notify:
Name: _____
Address: _____
Tel: (Home) _____ (Work) _____ (Cell) _____

13. Do you have any physical or mental condition which may limit your ability to perform the particular job for which you are applying? Yes No

If yes, give brief details:

14. Do you have a fear of heights? Yes No

15. Are you willing to take a physical exam? Yes No

16. Do any of your relatives work with CUC? Yes No

If yes, Name: _____

If yes, Name: _____

17. Were you previously employed with CUC? Yes No

If yes, please give the dates, from _____ (dd/mm/yy) to _____ (dd/mm/yy)

In which Department(s) did you work? _____

Reason(s) for leaving:

18. Have you ever been charged with a crime? Yes No

If yes, give details and dates:

19. **EMPLOYMENT RECORD**

a) Present or Most Recent Employer:

Employer Name: _____

Address: _____ Tel: _____

Name of your Supervisor/Manager: _____

Dates of employment, from _____ (dd/mm/yy) to _____ (dd/mm/yy)

Starting position: _____ Rate of pay: \$ _____ per _____

Last position held: _____ Rate of pay: \$ _____ per _____

Reason(s) for leaving:

May present employer be contacted? Yes No

b) Previous Employer:

Employer Name: _____

Address: _____ Tel: _____

Name of your Supervisor/Manager: _____

Dates of employment, from _____ (dd/mm/yy) to _____ (dd/mm/yy)

Starting position: _____ Rate of pay: \$_____ per _____

Last position held: _____ Rate of pay: \$_____ per _____

Reason(s) for leaving:

May previous employer be contacted? Yes No

20. REFERENCES

Please provide two (2) references (not related to you):

i) Name of first referee: _____

Address: _____ Tel: _____

Your name at time (if different): _____

ii) Name of second referee: _____

Address: _____ Tel: _____

Your name at time (if different): _____

21. EDUCATION AND TRAINING

Please indicate the highest level of education you have completed:

- Not a High School graduate
- G.E.D.
- G.C.S.E.
- High School graduate
- Between High School & Associate's
- Associate's degree
- Between Associate's & Bachelor's
- Bachelor's degree
- Between Bachelor's & Master's
- Master's degree
- Between Master's & Doctorate
- Doctorate degree
- Post-Doctorate

If you have an equivalency diploma (G.E.D.), what is the issuing agency? _____

22. EDUCATIONAL INSTITUTIONS:

Names and Addresses of all schools attended <i>(List High School, Business/Tech & College)</i>	Dates Attended		Type of Training received or Major Subjects studied	Credit Hours	Diploma, Degree, Licence received and dates received	Grade Point Avg.
	From	To				

23. Other training courses undertaken/Supplementary details:

(If there is insufficient space to list education and training information, please continue on a separate sheet of paper and attach to this form).

AGREEMENT

Note: Please review this form to make sure you have properly answered all questions. Please read the following statement carefully before signing.

Should I be employed and it is discovered that I made any false or incorrect statements or omitted any facts in filling out this application, it will be considered grounds for dismissal. I will, as a condition of employment, be expected to abide by all rules and regulations of the Company relating to health, safety and security that are now in force or that may be put in force. If I accept employment, I am subject to the laws of the Cayman Islands.

I hereby certify that I have read the above agreement and that in signing this application for employment it is done with the understanding that all statements are subject to investigation. I authorise and instruct you and/or your designate representative to make any investigation concerning information about my character, general reputation, credit, personal characteristics, medical history and mode of living. My previous employers may be asked for information relative to my employment record with them. I hereby release from all liability or damage those individuals or corporations who provide such information.

I hereby agree and understand that should I be employed, my employment shall, at all times, be at the will and satisfaction of CUC and that I can be terminated at any time with notice.

Signed: _____ Date: _____