



# Application for Employment

Capon Springs & Farms  
 3818 Capon Springs Road  
 High View, WV 26808  
[HR@caponsprings.net](mailto:HR@caponsprings.net)

Name:		Home Phone:	
Address: (street)		Cell Phone:	
(city, state, zip)		E-Mail Address:	
How did you learn about Capon?			
Are you interested in part-time or full-time work?		Expected Salary Range Per HR / DY / WK	
Can you work weekends?    Yes    No		Can you work evenings / nights?    Yes    No	
Dates available for work    Beginning:		Ending:	
PREVIOUS EMPLOYMENT: (please list your most recent work experience, if any)			
Name & Address of Employer:		Dates employed: From:                      To:	
		Job Title:	
		Reason for leaving:	
Description of work:			
Name & Address of Employer:		Dates employed: From:                      To:	
		Job Title:	
		Reason for leaving:	
Description of work:			
May We Contact Your Current / Past Employer(s)    Yes    No			

**Please Check all Departments of Interest**

- |                                                       |                                              |                                               |
|-------------------------------------------------------|----------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Bake Shop                    | <input type="checkbox"/> Golf Course/Grounds | <input type="checkbox"/> Office/Front Desk    |
| <input type="checkbox"/> Cook                         | <input type="checkbox"/> Housekeeping        | <input type="checkbox"/> Recreation/Lifeguard |
| <input type="checkbox"/> Dishwasher/Utility Worker    | <input type="checkbox"/> Kitchen Worker      | <input type="checkbox"/> Spa Office           |
| <input type="checkbox"/> Evening Shift Kitchen Worker | <input type="checkbox"/> Maintenance         | <input type="checkbox"/> Spa Room Worker      |
| <input type="checkbox"/> Food Shop Sales Associate    | <input type="checkbox"/> Massage Therapists  | <input type="checkbox"/> Wait Staff           |

EDUCATION: (High School, Trade School, College, etc.)

Name & Address (City, State) of School/University	Did you Graduate?	Type of Diploma/Degree

Please list any special skills, interests, awards, job-related licenses or certifications


References

Name	Email Address	Phone Number

I certify that the information contained in this application is correct to the best of my knowledge. I understand that falsification of information is grounds for refusing to hire me or for discharge should I be hired.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Capon Springs and Farms is an Equal Opportunity Employer and does not discriminate in hiring based on federally-protected classifications (i.e., race, color, national origin, ancestry, religion, sex, marital status, sexual orientation, disability, veteran status, age or genetic information).

This application is not intended to and does not create a contract or offer of employment. If hired, employment will be on an at-will basis and can be terminated by either party.

Capon Springs and Farms complies with Federal and State disability laws and makes reasonable accommodations for applicants and employees with disabilities. If reasonable accommodation is needed to participate in the job application or interview process, to perform essential job functions, and/or to receive other benefits and privileges of employment please contact, Human Resources 304-874-3695 ext. 18 or email [HR@caponsprings.net](mailto:HR@caponsprings.net).



# VOLUNTARY EEO IDENTIFICATION

Various agencies of the United States Government require employers to maintain information on applicants pertaining to factors such as race, sex and type of position for which an individual applies. The information requested on this sheet is for compliance with certain record keeping requirements. Capon Springs and Farms believes all persons are entitled to equal employment opportunities and does not discriminate against its employees or applicants for employment because of race, color, sex, national origin, disability, veteran status, age, marital status, or any other protected group status.

Name: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Position applied for: \_\_\_\_\_

Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female

Race/Ethnic Data: (Select One Category)

**White (Non-Hispanic)**

Origins of Europe, North Africa or Middle East

**Asian (Non-Hispanic)**

Origins of Far East, Southeast Asia or the Indian subcontinent

**Native Hawaiian or Other Pacific Islander**

Origins of Hawaii, Guam, Samoa, Or other Pacific Islands

**Black or African American (Non-Hispanic)**

Origins in any of the black Racial groups of Africa

**Hispanic or Latino**

Mexican, Cuban, Puerto Rican, South or Central American or Other Spanish culture or origin regardless of race

**American Indian or Alaskan Native**

Origins of North and South America (including Central America), who maintain tribal affiliation or community attachment

**Two or More Races (Non-Hispanic)**

All persons who identify with more than one of the above races

**I Do Not Wish To Disclose**

Regulations issued by the U.S. Department of Labor with respect to disabled individuals, disabled veterans and Vietnam Era veterans require that federal contractors provide an opportunity for self-identification to candidates seeking employment. Such self-identification is submitted on a voluntary basis, for use in accordance with regulations, and without subjecting the individual to adverse treatment.

Disabled/Veteran Classification:

**Special Disabled Veteran**  
(30% or more disability)

**Vietnam Era Veteran**

**I Do Not Wish To Disclose**

**Disabled Individual**

**Other Eligible Veteran**

**Check here, if the employee/applicant elected not to complete this form, the Worksite Employer has completed it through visual identification as required by law.**