



If you are offered a job, on what date will you be available for work? \_\_\_\_\_

List friends or relatives presently working for Westgate Management or any of its properties:

\_\_\_\_\_

List professional, trade, business or civic organizations to which you belong: (You may exclude groups which indicate race, color, religion, sex, national origin, age (40 and over), ancestry, gender identity, sexual orientation, marital or veteran status, familial status, victim of domestic/sexual violence status, disability or other classification protected by applicable law):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Give name, address and phone number of three references not related to you:

(1)

\_\_\_\_\_

(2)

\_\_\_\_\_

(3)

\_\_\_\_\_

Have you ever been convicted of a crime or felony which has not been annulled or sealed by the Court?

Yes \_\_\_\_\_

No \_\_\_\_\_

If yes, explain in full, indicating date, charge, place, under what name and action taken. Use additional paper if necessary

PLEASE NOTE: In case of conviction, a careful and thorough investigation will be made. Consideration will be given to the amount of time since the conviction, your employment history, the relationship between the type of employment considered for and the crime involved and any other circumstances or information that would pertain to your employment and the safe and efficient operation of the business. Failure to answer this question may result in termination of employment.

Explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT EXPERIENCE**

List each job held. Start with your present or last job. Include military service assignments, including the particular branch you have served in and volunteer activities. (You may exclude groups which indicate race, color, religion, sex, national origin, age (40 and over), ancestry, gender identity, sexual orientation, marital or veteran status, familial status, victim of domestic/sexual violence status, disability or other classification protected by applicable law). Note: a dishonorable or general discharge from military service is not an absolute bar to employment, and other factors will affect a final hiring decision.

EMPLOYER	DATES		JOB TITLE AND WORK PERFORMED
	FROM	TO	
Address			
Job Title	Hrly. Rate/Salary		
	Starting	Final	
Supervisor's Name			
Reason for Leaving			

EMPLOYER	DATES		JOB TITLE AND WORK PERFORMED
	FROM	TO	
Address			
Job Title	Hrly. Rate/Salary		
	Starting	Final	
Supervisor's Name			
Reason for Leaving			

EMPLOYER	FROM	DATES	TO	JOB TITLE AND WORK PERFORMED
Address				
Job Title	Starting	Hrly. Rate/Salary	Final	
Supervisor's Name				
Reason for Leaving				

Summarize special skills and qualifications acquired from employment or other experience: \_\_\_\_\_

\_\_\_\_\_

**RECORD OF EDUCATION**

School	Name & Address of School	Course of Study	Check Last Year Completed	List Degree
Elementary			5 6 7 8	
High			1 2 3 4	
College			1 2 3 4	
Other (Specify)			1 2 3 4	

HONORS RECEIVED: \_\_\_\_\_

**AGREEMENT**

If I am employed, in consideration thereof, I agree to abide by the rules and regulations of Hawksworth Gardens I and I recognize, understand and agree that my employment and compensation can be terminated with or without cause and with or without notice, at any time, at the option of Hawksworth Gardens I. I understand that no one other than the President of Hawksworth Gardens I has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, and that any such agreement must be in writing and signed by the President of Hawksworth Gardens I.

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I also agree to permit Hawksworth Gardens I to conduct substance abuse tests and any other background investigative procedures it deems appropriate with respect to my application and, in the event of hire, while employed.

HAWKSWORTH GARDENS I AND I UNCONDITIONALLY AGREE NOT TO ELECT A TRIAL BY JURY AND HEREBY KNOWINGLY, INTELLIGENTLY AND VOLUNTARILY WAIVE ALL RIGHTS HE/SHE/IT MAY HAVE TO TRIAL BY JURY IN ANY SUIT, ACTION, PROCEEDING, DISPUTE, CONTROVERSY OR CLAIM ARISING FROM OR RELATING IN ANY WAY TO ANY RELATIONSHIP OR MATTER INVOLVING HAWKSWORTH GARDENS I AND ME.

In the event of employment, I understand that false, incomplete or misleading information given in my application or interview(s) may result in discharge. I also understand and agree that employment may be subject to my taking a medical examination from a health care provider designated by Hawksworth Gardens I and that in his/her opinion I must be medically able to perform the work for which I am applying or being considered.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant

**THIS APPLICATION WILL REMAIN ACTIVE FOR 60 DAYS FROM THE DATE OF APPLICATION.**

# Consumer Report Release Form

## **Hawksworth Gardens I Limited Partnership**

As part of our employment process, we may obtain where permitted, one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency, such as:

iiX, a Verisk Analytics Business  
1716 Briarcrest Drive  
Suite 200  
Bryan, Texas 77802

- Consumer reports may include background, employment history, academic and/or professional credentials, military service, credit history, and driving history. The information gathered also may involve a criminal history and/or alcohol or drug use history, if any.
- An investigative consumer report may include information about your character, general reputation, personal characteristics and mode of living that may be obtained by interviews with individuals who may have knowledge concerning any such items of information. This also may include contacts of all listed prior employers to verify your employment history.
- If your employment falls under the federal Department of Transportation ("DOT") and the Federal Motor Carrier Safety Administration ("FMCSA"), including 49 CFR § 391.23, the report could include your driving, safety inspection and performance history from the FMCSA.

Under the provisions of the Fair Credit Reporting Act ("FCRA"), 15 U.S.C. § 1681 et seq.; FMCSA regulations in the Federal Code of Regulations, including 49 CFR § 40.329; and certain state laws, before we can seek such reports, where permitted, we must have your written permission to obtain the information.

You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You also are entitled to a copy of that document entitled "Rights Under the Fair Credit Reporting Act". Under the FCRA, before we take adverse action on the basis, in whole or in part, of information in a consumer report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

# Consumer Report Release Form

I have read and understood the preceding Disclosure to Consumer. Under the Fair Credit Reporting Act ("FCRA"), 15 U.S.C. § 1681 et seq., the regulations applicable to the federal Department of Transportation's Federal Motor Carriers Safety Administration, including 49 CFR § 40.329, the Americans with Disabilities Act and all other applicable federal, state, and local laws, I hereby authorize and permit **Hawksworth Gardens I Limited Partnership** to obtain information about me, where permitted, which may pertain to my employment records, driving history records, driving performance and safety history, criminal history, credit history, civil records, workers' compensation (post-offer only), alcohol and drug testing, verification of my academic and/or professional credentials, and information and/or copies of documents from any military service records.

I understand an "investigative consumer report" may include information as to my character, general reputation, personal characteristics, and mode of living that may be obtained by interviews with individuals who may have knowledge concerning any such items of information.

**I authorize, without reservation, any party or agency contacted to furnish the above-mentioned information to Hawksworth Gardens I Limited Partnership, or its agent. This report is for employment purposes only and will not be shared with an insurance entity.**

I hereby authorize procurement of my Investigative Consumer Reports. If hired, this authorization shall remain on file and shall serve as ongoing authorization for you to procure such reports at any time during my employment.

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**Full Legal Name (include Middle Initial)**

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**Signature**

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**Date**

**[IT IS RECOMMENDED THAT THIS SIGNATURE BE NOTARIZED, AS SOME STATES REQUIRE THIS.]**

# Driver Information

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**Full Legal Name (include Middle Initial)**

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**Social Security Number**

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**Driver's License Number**

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**State of Issuance**

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**Date of Birth**

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**Signature**

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**Date**