



GuestGhosts.com

"Where the Guests are Always Right"

GUESTGHOSTS APPLICATION

DIRECTIONS

Please follow directions carefully:

1. **Fill out the form** in your browser or PDF program ([download Adobe Reader, free](#))
2. **Save the PDF** to your desktop in a folder called "GuestGhosts".
3. **Open the PDF** to double check your entries are filled out correctly.
4. **Compose a new email** with your **name** and **date sent** in the SUBJECT.
5. **Attach the PDF** from your "GuestGhosts" folder to the email and send it to info@guestghosts.com
6. We will confirm our receipt within 48 - 72 hours.

Thank you,
CEG

NOTE: We recognize that we are asking you to fill out some items which may appear redundant, since you have filled out that same information in a different part of our Application. The information you provide is generated to many different sections of your file.

It is essential that you complete all applicable information.
All fields ARE REQUIRED and MANDATORY. If a field is not applicable, enter N/A.

PERSONAL CONTACT INFO

Name:

Personal Email:

Do you have Zoom?:

Home Address:

City:

State: Zip Code:

Open to work in other areas?

Other Area Preferences

Best Time To Reach

Time Zone:

Home Phone (Landline):

Mobile or Cell Phone:

Years in Hospitality/Travel Business:

Social Security (last 4 digits only):

WORK HISTORY

List Last Three (3) positions, starting with Current or most Recent.

We will NEVER contact Present Employer.

Company:

Company Description: (five words or less)

Your Title or Function

Base Salary:

Commissions:

From (MM/YY) To (MM/YY) From:

To:

Hours Work:

Company:

Company Description: (five words or less)

Your Title or Function

Base Salary:

Commissions:

From (MM/YY) To (MM/YY) From:

To:

Hours Work:

Company:

Company Description: (five words or less)

Your Title or Function

Base Salary:

Commissions:

From (MM/YY) To (MM/YY) From:

To:

Hours Work:

Paste Full Resume Here:

GENERAL INFORMATION

How did you learn of our service?

Person/Ghost Name

If Person/Ghost Name:

If Other:

Education - Last level completed:

School Name:

Fluent Language(s), Other than English :

Conversational Language(s):

Native Language:

BUSINESS REFERENCES

Please follow the instructions below carefully!

List up to 3 business references; if you have worked for fewer than three companies, list as applicable. We must be able to contact THE PERSON TO WHOM YOU REPORTED during your employment at each position. If that person is NO LONGER WORKING for the company for which you worked, we must still be able to contact that person at his/her new company, or at home if they are retired.

While ALL the contact information is required, the most important to you is the current e-mail address of each of these people. If you do not provide this e-mail address, YOUR APPLICATION WILL BE DELAYED.

Note: All candidates' present employment is held in strict confidence. We will NEVER contact your current employer for references or verification of any kind.

REFERENCE #1

Last/Current Employer: (We will NEVER contact Current Employer)

Report or Reported to:

Above Person's Title:

Their Phone Number including area code:

Their E-mail address:

REFERENCE #2

Previous Employer:

Report or Reported to:

Above Person's Title:

Their Phone Number including area code:

Their E-mail address:

REFERENCE #3

Previous Employer:

Report or Reported to:

Above Person's Title:

Their Phone Number including area code:

Their E-mail address:

PERSONALITY & TESTING

List five words that people use to describe you:

List five words that You would use to describe you:

If Our Client requests one or more of the following as a condition of giving you the opportunity to work for us:
(Will you allow the following?)

a. Credit Check:

Select

b. Criminal Check:

Select

c. Drug Test:

Select

d. Intelligence Test:

Select

e. Integrity Test:

Select

f. Live Video Interview: (Mandatory)

Select

g. In Lieu of your signature, please type your Mother's Maiden Name.

h. Enter Today's date to confirm your answers:

MM/DD/YYYY

Personal overview of your relevant background (please limit to approx 25 words). DO NOT abbreviate words, our scanner cannot read those words. You must provide us with an overview.

How often do you stay in a hotel?

How often do you eat out?

How often do you travel?

If you visit a Hotel, Restaurant or use Transportation, would you call yourself observant of the good things, the not so good things, the bad things, etc.

Have you ever requested a change of bed linen or other items in a room you have stayed. If yes, please explain.

In a restaurant, have you ever sent food back to the kitchen, or had a confrontation with a server? If yes, please explain.

Do you currently have contacts or connections with Hotel Decision Makers?

Select

Do you currently have contacts or connections with Travel Industry Decision Makers?

Select

Do you currently have contacts or connections with Cruise Decision Makers?

Select

IMPORTANT

Do you have a valid Passport?

Select

Do you have Alien Status?

Select

Do you have a Green Card?

Select

Do you have a Work Visa?

Select

Type of Visa:

Do you have a Student Visa?

Select

Other?

What is your Nationality?

Citizenship?

Dual Citizenship:

ACCURACY AFFIDAVIT (Mandatory)

I certify that the facts and responses set forth in this application, or otherwise made by me on this Application Form are true and complete to the best of my knowledge and belief. I authorize the investigation by GuestGhosts.com, a division of P. Jason King Associates, Inc., of the information contained in this application or

otherwise made by me, as may be necessary or desired in arriving at an employment decision. I understand that any false statements made by me in this application, or otherwise, constitute sufficient cause for rejection of this application or, if I am subsequently employed, can be grounds for dismissal.

I also understand that nothing in this application for employment creates an offer of employment or contract of employment of any kind or nature. If subsequently employed, my employment will be either on an at-will basis or contract basis, as determined by the employer and applicant status will be as an Independent Contractor.

Please indicate that you have read and agree to these terms:

Applicant's Authorization:

(Place full name using Upper and lower characters)

Today's Date (MM/DD/YYYY)

In Lieu of an actual signature, please provide the following to confirm
your agreement to these terms:

First School Attended:

Your Application with Resume will be reviewed extensively. We will contact you via email, if we require a Personal Interview which will be conducted via Zoom.

Please contact us at info@guestghosts.com with any problems you may have with the application form. Describe your problem with as much detail as possible.

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The King Group