



**Pyramid Peak Properties**

1725 Grizzly Mtn Dr. South Lake Tahoe, CA 96150 530-573-1888 [jobs@PyramidPeakProperties.com](mailto:jobs@PyramidPeakProperties.com)  
[www.PyramidPeakProperties.com](http://www.PyramidPeakProperties.com)

## Questionnaire/Application

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position Applied for: **Housekeeping or Maintenance**  
Location: **Kirkwood, CA**  
(Full-time or Part-time seasonal)

**Your Mailing Address:**

\_\_\_\_\_  
Street / P.O. Box City State Zip Code

\_\_\_\_\_  
Email



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<b>1. Full Name</b>					
Last Name	First Name	Middle Name	Jr., II, etc.	E-Mail	
<b>2. Other Names Used</b> – Maiden name, from a former marriage, alias(s), or nicknames(s).					
Name					
<b>3. Telephone Number</b>		-	-	<b>4. Social Security No.</b>	
Drivers License Number		State	Exp. Date	Lic. Number:	
<b>5. Residence</b> – List where you have lived, beginning with the most recent and working back 7 years. All periods in the last 7 years must be accounted for in your list. Add additional pages if necessary.					
Month/Year	Month/Year	Street Address		City	State
1)	TO				
Month/Year	Month/Year	Street Address		City	State
1)	TO				
Month/Year	Month/Year	Street Address		City	State
1)	TO				
<b>6. Disability</b>					
Do you have any disability that will prohibit you from working this job?					
<b>7. Place of Birth</b>					
City			State	County	
<b>Are you legally eligible for employment in this country?</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> (Proof of US citizenship or immigration status will be required upon employment)					
Date available for work: _____					
<b>Type of employment desired?</b> <input type="checkbox"/> <b>Full Time</b> <input type="checkbox"/> <b>Part-Time</b> <input type="checkbox"/> <b>Temporary</b>					
<b>Have you ever been discharged from employment?</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>					
If yes, please explain: _____					
_____					
_____					
<b>Lowest rate of pay you will accept?</b> _____ <b>Per</b> _____					



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**8. Educational Background**  
**A.** Please list the schools you attended. **B.** List number of years completed. **C.** Indicate degree or diploma earned, if any. **D.** Grade Point Average or Class Rank. **E.** Major and Minor field of study (if applicable)

A. School	B. No. Years Completed	C. Degree/ Diploma	D.GPA/ Class Rank	E. Major/ Minor
High School				
College or University				
Graduate School				
Technical School				

**Computer Literate:**  Yes  No **WPM** \_\_\_\_\_

Please list computer programs/software you are familiar with:

Please list your office equipment knowledge (fax, copy, etc.):

**9. Employment** – List your employment activities, beginning with the present and working back. The time period must be accounted for without breaks. For periods of unemployment, list dates and “unemployed” or “attending school.”  
**\*Please attach additional pages in same format if necessary. \*REFERRAL TO RESUMES OR OTHER SUBMITTED DOCUMENTS UNDER EMPLOYMENT HISTORY IS NOT ACCEPTABLE. RESUMES MAY BE SUBMITTED AS ADDITIONAL INFORMATION ONLY.**

Month/Year 1) TO	Month/Year	Employer Name	Position Title		
Hourly Rate/Salary \$ Per	May We Contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Employer Street Address		City	State	Zip Code	
Supervisor's Name/Title		Telephone Number ( )	Other Employer Reference		Telephone Number ( )
Describe Duties			Reason for leaving		
Month/Year 2) TO	Month/Year	Employer Name	Position Title		
Hourly Rate/Salary \$ Per	May We Contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				



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Employer Street Address		City	State	Zip Code
Supervisor's Name/Title	Telephone Number ( )	Other Employer Reference		Telephone Number ( )
Describe Duties		Reason for leaving		
<b>Month/Year</b>	<b>Month/Year</b>	<b>Employer Name</b>	<b>Position Title</b>	
3)	TO			
<b>Hourly Rate/Salary</b>		May We Contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		
\$	Per			
Employer Street Address		City	State	Zip Code
Supervisor's Name/Title	Telephone Number ( )	Other Employer Reference		Telephone Number ( )
Describe Duties		Reason for leaving		
<b>Month/Year</b>	<b>Month/Year</b>	<b>Employer Name</b>	<b>Position Title</b>	
4)	TO			
<b>Hourly Rate/Salary</b>		May We Contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		
\$	Per			
Employer Street Address		City	State	Zip Code
Supervisor's Name/Title	Telephone Number ( )	Other Employer Reference		Telephone Number ( )
Describe Duties		Reason for leaving		
<b>10. Personal References – List 3 people who know you well. They should be good friends, peers, roommates, etc., and who have known you for at least the last 5 years. DO NOT list relatives or anyone who is listed elsewhere on this application.</b>				
1) Name		Dates Known Month/Year    Month/Year to		Telephone Number <input type="checkbox"/> Day <input type="checkbox"/> Night ( )
Home or Work Address		City	State	Zip Code



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2) Name	Dates Known Month/Year    Month/Year to	Telephone Number <input type="checkbox"/> Day <input type="checkbox"/> Night (    )	
Home or Work Address	City	State	Zip Code
3) Name	Dates Known Month/Year    Month/Year to	Telephone Number <input type="checkbox"/> Day <input type="checkbox"/> Night (    )	
Home or Work Address	City	State	Zip Code

Skills and qualifications: Please summarize your special skills and qualifications acquired from employment, military service or other experiences that may qualify you to work:

**Background Information** – For all questions, provide all additional required information in the space provided or on a separate sheet. Ensure full name and social security number is on any attachments to this application.

<p><b>11.</b> Have you <b>ever</b> been arrested for, charged with, or convicted of, been imprisoned, been on probation, or been on parole for any offense(s)? Include all offenses where you have been found guilty, pled guilty or nolo contendere (no contest). (Leave out traffic fines of less than \$150.00)</p> <p>If “YES”, use item 16 to provide <b>the date</b>, explanation of violation, place of occurrence, and the name and address of the police department or court involved.</p>	YES	NO
<p><b>12.</b> Have you <b>ever</b> been convicted by a military court-martial?</p> <p>If “YES”, use item 16 to provide <b>the date</b>, explanation of violation, place of occurrence, and the name and address of the police department or court involved.</p>	YES	NO
<p><b>13.</b> Are you now under charges for any violation of law?</p> <p>If “YES”, use item 16 to provide <b>the date</b>, explanation of violation, place of occurrence, and the name and address of the police department or court involved.</p>	YES	NO
<p><b>14.</b> Have you <b>ever</b> been fired from any job for any reason, did you quit after being told that you would be fired, or did you leave any job by mutual agreement because of specific problems?</p> <p>If “YES”, use item 16 to provide <b>the date</b>, explanation of the problem, reason for leaving, and the employer’s name and address.</p>	YES	NO
<p><b>15.</b> In the last 5 years have you <b>illegally</b> used any controlled substance, for example, marijuana, cocaine, crack cocaine, hashish, narcotics (opium, morphine, codeine, heroin, etc.), amphetamines, depressants (barbiturates, methaqualone, tranquilizers, etc.), hallucinogenics (LSD,PCP, etc.), or <b>illegally</b> used prescription drugs?</p> <p>If “YES”, use item 16 below to provide the date(s) of use, identify the controlled substance(s) and/or prescription drugs used, and the number of times each was used. Include any treatment or counseling received.</p>	YES	NO



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**16.** Use this space to provide explanations to any questions you may have answered "YES" on this questionnaire.

**Certification that my Answers are True**

My statements on this application, and any attachments to it, are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that a false or fraudulent answer to any question or item on any part of this application or its attachments may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment.

\_\_\_\_\_ Date \_\_\_\_\_  
Applicant's initials

I certify that my responses to the above questions are made under penalty of perjury, which is punishable by fine or imprisonment, and that I have received notice that a criminal history records check will be conducted and is a condition of employment. I understand my right to obtain a copy of any criminal history report and my rights to challenge the accuracy and completeness of any information contained in the report.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date



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**Authorization for Release of Information**

I authorize the agents of Pyramid Peak Properties or any other duly accredited third party representative conducting my background investigation, to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, or other sources of information,. This information may include, but is not limited to, my academic, residential, achievement performance, attendance, disciplinary, employment history, and criminal history record information.

I authorize custodians of records and other sources of information pertaining to me to release such information upon request of agent, or other duly accredited representative authorized above regardless of any previous agreement to the contrary.

I understand that the information released by records custodians and sources of information is for official use by **Pyramid Peak Properties**, only for the purposes of determining my suitability for employment.

Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with the company, whichever is sooner.

Signature (sign in black ink)		Printed Name		Date
Other Names Used				Social Security Number
Current Address	State	Zip Code	Contact Number ( )	