



Branson Tourism Center
220 Branson Hills Parkway, Suite K
Branson, MO 65616
(417) 334-4400
(417) 334-4588 FAX

Dear Prospective Applicant,

www.BransonTourismCenter.com

Welcome to Branson Tourism Center. We are pleased that you have an interest in our company. **All prospective employees are required to complete an application. Applications are kept on “active” file for 12-months. We look forward to getting acquainted with you. Please review the following carefully:**

1. You will be required to disclose any criminal history in your past including: **conviction(s) of, or plead guilty to, any crime** for any reason. Certain offenses may prohibit employment with our company. *We will conduct a thorough criminal background check.*
2. There are specific **functions of the job; including physical capability requirements.**
3. Branson Tourism Center’s **Hours of Operation are 8 a.m.-10 p.m. daily.** ****Therefore, the position requirements include the ability to work nights, weekends, and holidays****
4. A **workers’ compensation records search** and **medical review** may be conducted.
5. We will conduct **drug screenings.** If you are using illegal drugs of any sort we cannot hire you.
6. A minimum of two **satisfactory reference checks** will be required for employment.
7. Any job offer is **conditional** upon satisfactory **reference and background checks.**

Note: If any of the above issues create a problem for you, please feel free to excuse yourself from this application process now, otherwise, please sign below.

Acknowledgement: To the best of my knowledge the above requirements do not pose a problem with my continuing to pursue employment with Branson Tourism Center.

APPLICANT SIGNATURE

DATE

(See next page for Application Instructions)

APPLICATION INSTRUCTIONS

Please complete the following items found in this packet:

1. Application for Employment

Please indicate the position(s) in which you are seeking in the *upper right corner of application*. The following provides a brief description of the positions that BRANSON TOURISM CENTER employs:

Sales Agent – Responsibilities include: working closely with clients to create, customize and complete itineraries for individuals traveling to Branson. Work with customers and clients from start to finish in handling every aspect of their travel and entertainment needs, providing extensive customer service while checking-in customers, making changes including corrections and adding show and lodging and assisting with savings associated with touring. In addition, will answer telephones and provide directions.

Groups Agent - Same as above only agent will work with groups, reunions, tours and conventions.

Processing Agent- Responsibilities include; working with customers ensuring orders are processed, accurate and filed within 72 hours. Ensure that all packages are put together, filed and accurate five (5) days before the customer's scheduled arrival date. Ensure that everyday functions are done with the utmost accuracy and attention to detail (i.e. charges, changes, confirmation numbers, filing, etc.). File all departures in a timely manner and ensure all are fine sorted before they are filed in the drawer.

Manager- Responsibilities include; Overseeing daily operations of Reservation and Welcome center. Verification of work schedule at the beginning of the shift to ensure that all employees are present. When necessary, complete tardy and late reports and secure replacements for absent staff members. Ensure that supplies are acceptable in order to operate the Welcome Center and Reservations Office appropriately. Manage agents to ensure there is appropriate counter coverage to meet the check-in demand and bring in additional staff as needed throughout the day. Resolve issues throughout the day regarding customer and inter-office issues. Run daily reports to track and address issues regarding order input and fulfillment of reservation activity.

2. Reference Information – Two (2) authorizations for reference verification forms are attached on the back of the application for the purpose of reference checking and verification;

- Please complete the information as highlighted/bolded within black box.
- Sign and date each copy.

3. Please return completed packet to the Reception Desk.

APPLICATION FOR EMPLOYMENT

Date: _____



Position(s) Applying for (Refer to previous pages)

Position (First Choice): _____

Position (Second Choice): _____

Number of Hours per week desired: _____

Specific Hours that you are able to work (days, evenings, any, etc.): _____

Days that you are able to work (Please check box):

Mon Tues Wed Thurs Fri Sat Sun

Date Available to begin working: _____

- Please complete ALL information as requested.
- Do not leave any blanks. "See Resume" will not be sufficient for the Employment History portion due to important contact information that is required for verification and reference reports.
- Please sign and date within the requested areas of the application.

Last Name: _____ Middle: _____ First name: _____

*If you have been known and worked by another name, please indicate: _____

E-mail Address: _____

Address: _____

Street Number/Name Apt # (if applicable) City State Zip

Telephone Number: (Home) (____) _____ - _____ (Cell Phone or Alt #) (____) _____ - _____

How did you learn about our company? Newspaper Internet Branson Tourism Center

Employee (name of employee) _____ Other: _____

Have you ever applied or been employed by Branson Tourism Center previously? No Yes, if yes when? _____

Have you ever worked for a similar organization? _____

Are you authorized to work in the U.S.? Yes No, please explain: _____

Have you ever plead guilty, been convicted of a crime, received a suspended imposition of sentence ("SIS") or suspended execution of sentence (SES)? No Yes If yes, please explain the disposition of the case? _____

Upon reviewing the position job requirements, is there any reason(s) why you would not be able to perform the essential functions required of the position? No Yes, if yes, please describe: _____

Qualifications

Please list any experience, qualifications or knowledge that you have relating to this type of business/industry: _____

Education

Please Circle Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 16+

List any schools, colleges or universities you have attended below:

Name of Institution	Degree, Diploma or Certificate	No. of Years	Did you Graduate
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Employment History

Please list your last three employers below, starting with your most recent or current employer, Please do not leave any blanks incomplete.

Employer Name: _____

Address: _____
Street Number / Name City State Zip

Job Title: _____ Description of duties: _____

Supervisor Name: _____ May we contact? Yes No, if "no" please explain: _____

Telephone Number: (____) _____ - _____

Employed from: _____ To: _____ Ending Salary: \$ _____ hour month year

Reason for Leaving: _____

Employer Name: _____

Address: _____
Street Number / Name City State Zip

Job Title: _____ Description of duties: _____

Supervisor Name: _____ May we contact? Yes No, if "no" please explain: _____

Telephone Number: (____) _____ - _____

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PERSONAL REFERENCES – Non-Related (i.e. not family, in-laws, aunt/uncle, etc.)

Name		Name	
Address		Address	
City	State	Zip	
Relationship (Friend, Minister, Etc.)		Relationship (Friend, Minister, Etc.)	
Years Known	Phone (Include Area Code)	Years Known	Phone (Include Area Code)

Applicant Acknowledgement

I have read and understand the applicant introduction note on the front side of the application form. I verify that the information which I provided in this Application for Employment is true, and that any false information, omissions or misrepresentations of facts requested in this application may result in rejection of my application or immediate termination at any time during my employment with Branson Tourism Center.

I authorize Branson Tourism Center and/or its agents, including consumer reporting bureaus, to verify any of this information including, but not limited to, criminal history and motor vehicle driving records. I also authorize any reference source to provide Branson Tourism Center with any and all information covering my background and hereby release any said sources from any liability for any damage whatsoever for issuing this information.

I further agree that Branson Tourism Center may furnish like information to those with whom I may hereafter seek employment and hereby agree to hold Branson Tourism Center free and harmless from any and all liability thereafter. I agree to conform to all rules and regulations of Branson Tourism Center and acknowledge that if my application is accepted and employment engaged, I am an employee at will and have no contractual right of employment.

Branson Tourism Center is an equal opportunity employer. This application for employment will be current for a period of one year. A new application must be completed if the applicant wishes to be considered for employment after that time.

Signature

Date

PROFESSIONAL REFERENCE

_____ Mail _____ Telephone _____ Fax

APPLICANT COMPLETE THIS PORTION

Last Name: _____ First Name: _____ Middle Name: _____

Soc. Sec. No./Identification: _____

Former Names (if applicable) _____

Position Applied For: _____

I authorize **Branson Tourism Center** and/or its agents, including consumer reporting bureaus, to verify my employment experience. I also authorize any reference source to provide **Branson Tourism Center** with any and all information covering my background and hereby release any said sources from any liability for any damage whatsoever for issuing this information. A copy of this document shall have the same force and effect as the original.

Applicant's Signature _____ Date _____

Office use only, please do not complete below the line.

EMPLOYMENT REFERENCE

The person named above has applied for employment with Branson Tourism Center. We have been referred to you for information regarding the applicant's qualifications and/or past performance. We would appreciate your replies to the questions asked in the appropriate section. Space for additional comments is provided. All information is confidential. Thank you for your assistance. Please use postage paid envelope or return by fax.

Name of Employer _____ Phone _____

Reference Contact _____ Title _____

Position(s) held? _____ What was the nature of his/her job? _____

Employed from _____ to _____ Reason for Leaving _____

Did employee give proper notice? YES _____ NO _____ **Would you rehire? YES _____ NO _____**

What are his/her strong points? _____

How would you rate his/her attendance record on scale of 1-10 with 10 being excellent? _____

What areas need improvement? _____

Could you comment on his/her work performance? _____

Can he/she function independently with minimal supervision? _____

Did he/she have any personal difficulties that interfered with his/her work? _____

Is there anything else of significance that you would like to share? _____

The salary of _____ was given to us. Can you confirm that this is accurate? _____

_____ **Verified Dates of employment only**

Reference check completed by: _____ / (Title) _____ Signature: _____

Date: _____

PROFESSIONAL REFERENCE

_____ Mail _____ Telephone _____ Fax

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Date: _____

PERSONAL REFERENCE

Reference Contact: _____ Phone: _____

How long have you known applicant? _____

What is your relationship with the applicant? _____

Have you had contact with the applicant within the last 12 months? Yes _____ No _____

Could you comment on his/her job related personal characteristics? _____

For the following, please rate on the following Scale:

1 = Excellent 2 = Good 3 = Fair 4 = Poor

• Flexibility: _____

• Appearance: _____

• Dependability: _____

• Honesty: _____

• Initiative: _____

• Judgment: _____

• Maturity: _____

• Responsibility: _____

• Self Expression: _____

• Relates to Others: _____

• Comments: _____

Reference check completed by:

Signature

Date

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• Comments: _____

Reference check completed by:

Signature

Date