



**THE FOLLOWING IS A GENERAL SUMMARY OF SMAAASH MOA BENEFITS. THE PROVISIONS OF THE APPLICABLE PLAN DOCUMENTS, HOWEVER, CONTROL. SMAAASH reserves the right to discontinue or modify these benefits at any time, within its sole discretion.**

**1. Medical Insurance:**

- a. All employees (Employees working 30 hours per week or more) are eligible for health insurance with a \$500 deductible.
- b. Company will pay 100% premium for all eligible employees (for employee coverage only).
- c. Employees can add their dependents in the policy subject to the employees agreeing in writing to deduct the additional premium from their paycheck for their dependents.

**2. Paid Time Off (PTO):**

- a. Company will provide 3 weeks (15 Days or 120 hours) of PTO in a year for all full-time employees (Employees working for 40 hours per week or more)
- b. PTO will be accrued over a period of time. Employees will accrue 2.3 hours of PTO for every 40 hours of work.
- c. Employees may carry over no more than 2 times of their annual PTO allotment from previous year (i.e. no more than six weeks of PTO may be carried over).
- d. Employees are entitled solely to the amount of PTO accrued at the time a PTO request is made.
- e. Employees begin accruing PTO benefits from the first week of employment.
- f. PTO is not “earned wages” under the law. Accrued PTO is to be solely used by current employees for rejuvenation. No unused PTO will be paid after termination of employment for any reason, whether voluntary or involuntary.
- g. Accrued PTO balance must be used if an employee takes leave under the Family Medical Leave Act.

**EMPLOYMENT APPLICATION FORM**

**Referred by:** \_\_\_\_\_

**Post Applied For:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**(I) Personal**

**Information:**

**Full Name:** \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

ZIP: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone: (M) : \_\_\_\_\_ (R) \_\_\_\_\_

Are you under the age of 18? Yes/ No

If Yes, State your age -



**(II) Qualification (High School Onwards)**

Degree	Name of School /College/University	Year of passing

**Extracurricular Activities/Training (if any)**

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**(III) Experience (Start from current employment)**

Name & Full of Address Employer	Period		Designation		Reason for Leaving	Last Drawn Pay Per month
	From (MM/YY)	To (MM/YY)	At the time of joining	Last position held		



**(IV) References (Other than relatives)**

<b>Sr.No</b>	<b>Name, Address &amp; Contact No.</b>	<b>Official Designation &amp; Organization</b>	<b>Period for which He/She knows you</b>	<b>Capacity in which He/She knows you</b>

**(V) Other Details**

a. Salary Requirement: \_\_\_\_\_ per hour / year

b. Date Available to Start: \_\_\_\_\_

c. Time of Employment Desired:

a) Full-time (40 Hours per week or more)

b) Part-time (More than 30 hours & less than 40 hours per week)

c) Temporary (Less than 30 hours)

d. Are you legally eligible for employment in USA? Yes / No

e. If necessary for the JOB, I am able to:

1. Work (Which Shifts)? - Morning / Afternoon / Evening

2. Work (Overtime/Weekends)? \_\_\_\_\_



## **(VI) Declaration**

I DECLARE THAT THE INFORMATION GIVEN, HEREIN ABOVE, IS TRUE & CORRECT TO THE BEST OF MY KNOWLEDGE & BELIEF & NO INFORMATION HAS BEEN SUPPRESSED. I UNDERSTAND THAT THE ABOVE INFORMATION IF FOUND FALSE OR INCORRECT, AT ANY TIME DURING THE COURSE OF MY EMPLOYMENT, CAN RESULT IN THE TERMINATION OF EMPLOYMENT. I ALSO UNDERSTAND THAT SMAAASH IS AN AT-WILL EMPLOYER, AND THAT EMPLOYMENT WITH SMAAASH CAN BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

IN ADDITION, I UNDERSTAND THAT IF I HAVE A BACKGROUND OF CRIMINAL CONVICTIONS, IT MAY DISQUALIFY ME FROM EMPLOYMENT WITH SMAAASH, DEPENDING UPON THE POSITION FOR WHICH I AM BEING CONSIDERED.

DATE:

PLACE:

SIGNATURE

### **SMAAASH Code of Conduct**

§ Embrace and Exemplify the SMAAASH Vision, Core Values, and Brand Promise.

§ Exceed the Guest's expectation in each and every area of our Guest's experience.

§ Be a Brand Ambassador for SMAAASH at all times both on and off site.

§ Be knowledgeable, Friendly, and informed of ALL areas and aspects of SMAAASH.

§ Attend all meetings and briefings as scheduled. Know all offers, specials, and events that occur daily, on-going, and limited offerings.

§ Know each daily event occurring including names, companies, and VIPs.

§ Keep SMAAASH clean and safe for our guests. Be aware of your immediate surroundings and ensure you always look your best.

§ Utilize the 10-4 rule: Make eye contact, acknowledge guests, makes pleasant verbal contact. Greet guests upon arrival to your area, and thank them when they leave your area. Extend high Fives to our guests!

§ Be pro-active to our guests needs. Anticipate how we can enhance their visit.

§ ABSOLUTELY NO CELL PHONE USAGE while on the floor, or where a guest can see you. It is not to be kept in your possession while clocked in. You may use your phone before, after, or while on break off premises, or in our Break Room.

§ ABSOLUTELY NO influence of alcohol or illegal drugs possession, distribution, sale, transfer, or use of alcohol or illegal drugs while on the floor.

§ ABSOLUTELY DO NOT Carry lethal weapons, fight or attempt bodily injury to other employees & guests.

**SMAAASH disclaimer:**

The physical demands described here are generally representative of those that must be met by a team member to successfully perform the essential functions of this job, although the actual demands and essential functions will vary for each position. Reasonable accommodations, when required under applicable law, will be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this position, the team member will regularly be required to:

- a. Work days, nights, and/or weekends as required.
- b. Work in noisy, fast paced environment with distracting conditions.
- c. Move about facility and stand for long periods of time.
- d. Read and write handwritten notes.
- e. Lift and carry up to 30 pounds.
- f. Must have regular and predictable attendance.

The above statements are intended to describe the general nature and level of work being performed by individuals assigned to this job. They are not intended to be an exhaustive list of all responsibilities, duties, and skills.

I, \_\_\_\_\_, agree to adhere to the above statements.

Signature:

Date:

**PLEASE FILL THIS, PRINT, SCAN AND EMAIL US ON**  
**JOBS@SMAAASHUSA.COM**