

Dutch Hollow Country Club Application for Employment

Last Name: _____ First _____ Middle Initial _____
 Street address : _____ City _____ state: _____ zip _____
 Home Phone _____ Cell Phone _____ Email _____
 Position applied for _____ Rate Pay expected \$ _____ Per _____
 Other positions qualified for _____
 Circle Shift(s) you can work— Anytime full time | part time day | night weekends Comments: _____
 List Any Special Licenses or Certifications? _____

Answer Yes or No to the following questions

Are you employed now? _____ (yes no) If yes may we inquire of your present employer ? _____
 Are you eighteen (18) years of age or older _____
 Are you legally eligible for employment in the United States? _____
 Have you ever been convicted of and or pleaded guilty to a felony or misdemeanor in the past seven (7)years? _____
 Have you ever been employed by this company ? _____ If Yes Date _____
 Americans with disabilities Act Clarification: If a job description has been provided, can you perform the essentials job functions of the position you have applied for with or with out reasonable accommodation? _____

PERSONAL INFORMATION ATTENTION TO EDUCATION

School	Name& location	Course of study	# years Completed	Did you Graduate	Degree or Diploma
High School				Yes or no	
College				Yes or no	
Other Schools Graduate, Business or Vocation					
Other Training Skills					
Military Training	Branch:		Years Served?		

Employment Record (List most recent first)

EMPLOYMENT RECORD

1. Name of Company: _____ Phone: _____
 Address: _____
Street City zip
 Dates of Employment : From _____ To _____ Salary Start: \$ _____ per _____
 Type of Business _____ Last \$ _____ per _____
 Your Position/Title _____ Supervisor _____
 Reason for Leaving _____
 Briefly Describe your Duties and Responsibilities: _____

2. Name of Company: _____ Phone: _____
 Address: _____
Street City zip
 Dates of Employment : From _____ To _____ Salary Start: \$ _____ per _____
 Type of Business _____ Last \$ _____ per _____
 Your Position/Title _____ Supervisor _____
 Reason for Leaving _____
 Briefly Describe your Duties and Responsibilities: _____

3. Name of Company: _____ Phone: _____
 Address: _____
Street City zip
 Dates of Employment : From _____ To _____ Salary Start: \$ _____ per _____
 Type of Business _____ Last \$ _____ per _____
 Your Position/Title _____ Supervisor _____
 Reason for Leaving _____
 Briefly Describe your Duties and Responsibilities: _____

Explain & give details of any period(s) in which you were unemployed for more than 60days
 (Use additional sheet)

Business References: (Other than relatives or former supervisors) (List Three)

REFERENCES

1.	Name	Address (Street, City Zip)	Phone	Occupation	Years Known
2.	Name	Address (Street, City Zip)	Phone	Occupation	Years Known
3.	Name	Address (Street, City Zip)	Phone	Occupation	Years Known

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any misrepresentation is cause for voiding this application or termination of employment, if hired. I authorize investigation of any information provided on this application form. I also authorize investigation of my employment record and references and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages or salary, be terminated at any time without any prior notice.

Date _____ Signature of Applicant _____