



MANADA GOLF CLUB APPLICATION FOR EMPLOYMENT

We are an Equal Opportunity Employer

Date: _____

NAME:

First _____ Middle Initial ____ Last _____

ADDRESS:

Street _____

City _____, State _____ Zip _____

CONTACT INFORMATION:

Phone (Home) _____ Phone (Cell) _____

Email _____

DESIRED POSITION:

Position Desired: _____ Salary Desired _____

When can you start? _____ Are you employed now? _____

May we contact your current employer? _____ Social Security # _____

18 Years or Older? _____ Date of Birth _____

U.S. Veteran? _____ Branch of Service _____ Rank _____

Ever applied to this company before? Yes _____ No _____ If Yes, When? _____

Who referred you to this company? _____

Have you ever been charged or convicted of a felony or a misdemeanor other than a traffic offense or do you have criminal charges pending against you? Yes? _____ No? _____ If yes, please explain.

Have you been released from confinement following a conviction for a felony? Yes? ____ No? _____ If yes,

please explain: _____

Are you legally eligible to work in the United States? Yes? _____ No? _____

APPLICABLE SKILLS/TRAINING/EXPERIENCE:

EDUCATION:

School Level	Name & Location	Years Completed	Graduate?
High School	_____		
College	_____		
Trade School	_____		
Graduate School	_____		

EMPLOYMENT HISTORY:

Employer: _____	Job Title: _____
Address: _____	From/To _____
Supervisor: _____	Phone# _____
Starting Salary _____	Final Salary _____
Description of Work _____	Reason For Leaving _____

Employer: _____	Job Title: _____
Address: _____	From/To _____
Supervisor: _____	Phone# _____
Starting Salary _____	Final Salary _____
Description of Work _____	Reason For Leaving _____

Employer: _____	Job Title: _____
-----------------	------------------

Address: _____ From/To _____
Supervisor: _____ Phone# _____
Starting Salary _____ Final Salary _____
Description of Work _____ Reason For Leaving _____

PROFESSIONAL REFERENCES:

Name: _____ Phone: _____
Occupation/Relationship: _____ Years Acquainted: _____
Name: _____ Phone: _____
Occupation/Relationship: _____ Years Acquainted: _____
Name: _____ Phone: _____
Occupation/Relationship: _____ Years Acquainted: _____

This application will be considered active for a maximum of ninety (90) days. If you wish to be considered for employment after that time you must reapply. Only completed applications will be given consideration.

AUTHORIZATION

I authorize investigation of all statements and references (including previous employers) contained in this application. I authorize each of the personal and employment references I have listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from any damage that may result from furnishing same to you.

I understand and agree that any misrepresentation or omission of information in this application may result in the cancellation of my application or the termination of my employment regardless of when the misrepresentation or omission is discovered.

I understand and agree that, if hired, my employment is "At-will." Employment is for no definite period and may be terminated by either party at any time with out prior notice, for any reason or no reason. This application is not intended to be, nor does it constitute, a contract of employment.

I certify that the information given in this application is correct and complete.

I hereby acknowledge that I have read this application completely and understand it fully.

Date: _____ Signature: _____

As an equal opportunity employer, this company recruits and employs personnel on the basis of qualifications and without regard to race, religion, color, sex, age, national origin, disability, other factors prohibited by federal or state nondiscrimination law or any other characteristics protected by applicable laws.