



Employment Application

1. Please read "Application Information."

Equal Opportunity Employer

INSTRUCTIONS

Other

(If you need help in filling out this application form, please notify us so that we can try to accommodate your needs.)

Date:	Phone:			_ Other Phone:				
Email:								
lame:				Social Sec. #				
Street:		City: _		State:	te:		Zip:	
Are you 16 years or older?	Yes	No	Are you 19 yea	rs or older?	Ye:	s	No	
APPLICANT INFORMAT	ΓΙΟΝ							
cut will not necessarily bar an applicate equired to submit to a medical review certify that I have read and understate by me on this application are complectub, if offered, will be at-will and mactub. I also understand that this arrunderstand that, if employed, I may from the and that none of this is intended	v and be examined and the APPLICAN te and true to the by be terminated at angement may be om time to time rector alter the at-will not be a second to a second	by a medic IT INFORM best of my k any time for changed or beive wage lature of my	al professional designation paragraph of chowledge and belied any reason, with orally in writing, which increases, promotion employment.	n this form and the firm and th	npany. at the answeat employned cause, by President of the portion, perform	ers and s nent with I me or by I Plattevie ance eval	tatements giver Platteview Goli Platteview Goli ew Golf Club. uations, and the	
Signature:	Date:							
Position applying for: Your application will be considered for			Date avail	able for work: _			 	
Can you perform the functions of the demonstrate how you will be able to p						ed to desc	cribe or	
Can you lawfully work in the Uni .e. valid drivers license, social securit	ted States? y card, green card)	Yes _	No (Proof o	or lawful work statu	us will be red	quired upo	on employment.(
Which is the Highest Grade You	u've Completed	(7 8 9 1	0 11 12 13 14	15 16 16+):_				
			City, State	Gra	aduated	Major		
High School	 							
College								

EMPLOYMENT REFERENCES

Your application may not be considered unless every question is answered. Since we will make every effort to contact previous employers, the correct telephone numbers of past employers are critical. Most Recent Employer: Are you currently working for this employer? If yes, may we contact? Phone No. City/State Company Name Dates Employed: From _____ To ____ Job Title: _____ Supervisor's Name: _____ Salary _____Per ____ Reason for Leaving _____ Second Most Recent Employer: City/State Company Name Phone No. Dates Employed: From To Job Title: Supervisor's Name: _____ Salary _____ Per ____ Reason for Leaving _____ Duties: ____ OTHER REFERENCES Include only individuals familiar with your work ability. Do not include relatives. Name Address/Phone Years known/Relationship Please list any other skills, licenses or certificates that may be job related or that you feel would be of value to this job or company: _____ Have you ever applied to **Platteview Golf Club** before? Yes _____ No Have you ever been employed by **Platteview Golf Club** before? Yes _____ No _____ Yes ____ No Have you ever been convicted of a felony? If yes, please give date and describe: RELEASE REGARDING INFORMATION I authorize Platteview Golf Club and/or its agents, including consumer reporting bureaus, to verify any of the information I have given in my application for employment including, but no limited to, criminal history and motor vehicle driving records. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said person, schools, companies and law enforcement authorities from any liability for any damage whatsoever for issuing this information. Signature: _____ Date: _____