

Eau Claire Golf & Country Club

FOR OFFICE USE ONLY

Position applied for: Date: Start Date: Employee #:

WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

NOTICE: Applicant should read the following information carefully before filling out any of the questions in this form. We are an equal opportunity employer and full subscribe to the principles of equal opportunity employment. It is our policy to seek and employ the best qualified personnel in all positions without regard to race, color, religion, age, sex, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes and information requested on this application will not be used for any purpose prohibited by law.

Applicant Information								
Full Name:						Date:		
	Last	First			M.I.			
Address:	Street Address			Apartment/Unit #				
	City				State		ZIP Code	
Phone: ()		E-mai	l Address: _				
			Are yo	ou 18 years or	older?	S NO		
If not, do yo	ou have a valid work permit?	YES NO	Work	permit numbei	::			
Position A	pplied for:							
Are you ap		ART-TIME TEN	MPORAF		Availability:	DAYS	NIGHTS	WEEKENDS
Date Availa	able:							
Who recommended you for this position?								
Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.?								
Have you e	ever worked for this company?	YES	NO	If so, when?				
Have you e	ever applied to this company be	YES efore?	NO	If so, when?				
Have you e	YES NO Have you ever been convicted of a felony?							
If yes, please explain:								
Education								
High School	ol:	Add	ress: _					
From:	To:	Did you gradua	ate?	YES NO	Degree: _			
College:		Add	ress: _					
From:	То:	Did you gradua	ate?	YES NO	Degree:			
Other:		Add	ress: _					
From:	To:	Did you gradua	ate?	YES NO	Degree: _			
Experience								
Please circle the kind of work you have done that is relevant to the position you are applying for:								
	Bartender	Bus F	Person	Cashier	Custon	ner Service	:	
	Host or Hostess	Mana	ger	Superviso	r Wait S	taff		
	Other							

Previous Employn	nent				
Company:	Phone: ()				
Address:	Supervisor:				
Job Title: Starting Salary: \$	Ending Salary: \$				
Responsibilities:					
From: To: Reason for Leaving:					
May we contact your previous supervisor for a reference?	NO				
Company:	Phone: ()				
Address:	Supervisor:				
Job Title: Starting Salary: \$	Ending Salary: \$				
Responsibilities:					
From: To: Reason for Leaving:					
May we contact your previous supervisor for a reference?	NO				
Company:	Phone: ()				
Address:	Supervisor:				
Job Title: Starting Salary:	Ending Salary: \$				
Responsibilities:					
From: To: Reason for Leaving:					
May we contact your previous supervisor for a reference?	NO				
Military Service	9				
Branch:	From: To:				
Rank at Discharge: Type of	Discharge:				
If other than honorable, explain:					
Disclaimer and Sigr	nature				
Are there any job duties that you would be unable to perform?					
I certify that my answers are true and complete to the best of my knowledge.					
If this application leads to employment, I understand that false or misleresult in my release.	ading information in my application or interview may				
Signature:	Date:				

Attachment to Employment Application

Availability Continued

Please Place an "X" In All Available Time Slots

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM:	AM:	AM:	AM:	AM:	AM:	AM:
PM:	PM:	PM:	PM:	PM:	PM:	PM:

Statement

I have read and fully understand the questions asked in this application. I certify that all answers given by me are true, accurate, and complete and understand that the omission and/or misrepresentation of any fact from this application or during any interview will be cause for immediate dismissal. I hereby authorize the Company to obtain reference information about me and release all persons from liability for doing so.

If hired, I agree to abide by all of the company rules and regulations and understand that if employed, my employment may be terminated with or without cause and with or without notice, at any time, at the option of either the company or me. I further understand that no representation, whether oral or written, by any representative or agent of the Club, at any time, can constitute a contract of employment. I understand that the Club and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance, or otherwise change all policies, procedures, benefits, or other terms or conditions of employment. No representative or agent of the Club has the authority to enter into any agreement for employment for any specific period of time or to make any change in any policy, procedure, benefit or other term or condition of employment other than in a document signed by the Club President and me, or to make any agreement contrary to the foregoing.

DATE	 -	
Signature of Applicant _		