



APPLICATION FOR EMPLOYMENT

DIRECTIONS: Type or Print, Using Blue or Black Ink. Do Not Forget to Sign the Application on the Back Page.

PERSONAL INFORMATION

NAME (LAST) _____ (FIRST) _____ (MIDDLE) _____		DATE OF APPLICATION _____
PRESENT ADDRESS (STREET, CITY, STATE, ZIP CODE) _____		Phone Number –Day () _____ Phone Number– Evening () _____
Address Where You May Be Contacted If Different From Present Address _____		Alternative Phone Number () _____ Are You Under 18 years old? _____ Are you of legal age to _____
Have You Previously Worked for Us? YES <input type="checkbox"/> NO <input type="checkbox"/>	Dates of Employment _____ Location _____ Position _____	Supervisor _____

If Hired, Can You Provide Proof Or Legal Right To Work In The United States: Yes No

Have You Ever Been Convicted Of Any Criminal Offense Other Than Minor Traffic Violations? _____ If So, Please Explain. A Criminal Conviction Will Be Considered Only In Relation To The Job for Which You Are Applying. Seriousness And Nature Of The Offense, Time Elapsed, And Rehabilitation Will Be Taken Into Account.

EMPLOYMENT DESIRED

List Position Applying For: Check Employment Type Below: <input type="checkbox"/> Full-Time Regular <input type="checkbox"/> Part-Time Regular <input type="checkbox"/> Seasonal Part Time <input type="checkbox"/> Seasonal Full Time <input type="checkbox"/> On Call		Source Of Referral: <input type="checkbox"/> Yahundasis Employee <input type="checkbox"/> Newspaper <input type="checkbox"/> Professional Publication <input type="checkbox"/> Employment Agency <input type="checkbox"/> Website/Online Job Site <input type="checkbox"/> School <input type="checkbox"/> Other, Please Indicate: _____	Desired Work Location (S): _____
Date Available _____	Desired Wages \$ _____ per year \$ _____ or per hour	Specify Your Availability, Day or Evening Shifts; Days Of The Week: _____	Times Available For Work: _____

Note: Even if you have submitted a resume, you still need to complete the Employment Record, Education & Training, and References sections. Please be sure to provide all of the requested information in order to ensure that your application will be considered.

EMPLOYMENT RECORD

List Most Recent Employment First

Start Date _____	End Date _____	Final Position Title _____	Final Wages _____	May We Contact this Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
Employer _____			Last Supervisor's Name _____	
Street Address, City, State, Zip Code _____			Reason For Leaving _____	
Position Description _____			Phone () _____	
Start Date _____	End Date _____	Final Position Title _____	Final Wages _____	May We Contact this Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
Employer _____			Last Supervisor's Name _____	
Street Address, City, State, Zip Code _____			Reason For Leaving _____	
Position Description _____			Phone () _____	

An Equal Opportunity Employer

NO PERSON SHALL BE DENIED EMPLOYMENT ON THE BASIS OF RACE, COLOR, ETHNICITY, NATIONAL ORIGIN, SEX/GENDER, SEXUAL ORIENTATION, RELIGION, CREED, DISABILITY (INCLUDING HIV STATUS), AGE, VETERAN STATUS, MARITAL STATUS OR EX-OFFENDER STATUS, OR ANY OTHER CATEGORY PROTECTED BY LAW. EMPLOYMENT IS CONTINGENT UPON FURNISHING EVIDENCE OF IDENTITY AND EMPLOYMENT ELIGIBILITY IN THE UNITED STATES.

APPLICATION FOR EMPLOYMENT

EMPLOYMENT RECORD CONTINUED

Start Date	End Date	Final Position Title	Final Wages	May We Contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer			Last Supervisor's name	
Street Address, City, State, Zip Code				Reason For Leaving
Position Description				Phone ()

EDUCATION & TRAINING

College University Or Technical School	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree Or Diploma	Major Subject	Name of School City and State
College University Or Technical School	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree Or Diploma	Major Subject	Name of School City and State
High School Last Attended	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree Or Diploma	Major Subject	Name of School City and State
Other	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree Or Diploma	Major Subject	Name of School City and State

List Golf Skills, Licenses, Computer Skills, Equipment Knowledge, Typing, Or Other Skills & Training You Consider Relevant To Employment With Us

Professional Organizations, Industry Related Associations, Honors, Certifications, And Professional Licenses You Consider Relevant To The Position For Which You Are Applying.

REFERENCES

List three persons, other than relatives or personal friends, you will permit us to contact, who have knowledge of your work experience and/or education.

Name/Title/Relationship to Applicant	Last Known Address	Phone Numbers and Email Addresses

AUTHORIZATION Application Must Be Signed Prior To Submitting To The Yahnundasis Golf Club For Consideration.

My signature indicates my promise that the information provided in this application And any accompanying documentation, is true and complete. I understand that any False or misleading information, or significant omission, may disqualify me from Consideration for employment; or if hired, may lead to my dismissal if discovered at a later date. I agree to immediately notify the Yahnundasis if I should be convicted of a felony, or any crime involving dishonesty, breach of confidentiality, controlled Substances, sexual misconduct, abuse or violence while my job application is pending, Or during my employment, if hired. I agree to submit to drug testing as well as background checks, as part of the hiring process for certain positions with the Yahnundasis; and will receive separate notice and release before any such test.

I grant the Yahnundasis or its authorized agent, permission to obtain personal investigative reports on me, including, but not limited to statements made in this application, and on my resume if provided, character information, general reputation, education, and training certification. I hereby authorize and release from any legal liability, all persons, schools, and employers named in this application, to provide the Yahnundasis with any information or opinion requested and related to my potential employability. If hired, I understand that employment with the Yahnundasis is at-will (for no definite period of time, and may be terminated at any time for any reason, with or without notice).

Applicant's Signature _____ **Date** _____