



Wedgewood Cove
GOLF CLUB

Position Applying for _____

Telephone Number: _____

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

To Applicant: We appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications and may assist us in placing you in future positions.

Please Print and Answer all Questions

_____ Date of application

_____ First Name MI Last Name

_____ Address City State Zip

Have you ever worked for Wedgewood Cove Golf Club in the past? Yes No

If yes, indicate dates / position(s): _____

Salary Expectations _____ Type of position: Full Time Part Time

How did you Learn about the position for which you are applying?

EMPLOYMENT RECORDS

1 Present or Last Employer	Address	Phone
From: Mo/Yr	To: Mo/Yr	Supervisor's Name
Job Title	Reason for Leaving	Last Hrly Rate of Pay

Description of Duties

2 Employer	Address	Phone
From Mo/Yr	To: Mo/Yr	Supervisor's Name
Job Title	Reason for Leaving	Last Hrly Rate of Pay

Description of Duties

3 Employer	Address	Phone
From Mo/Yr	To: Mo/Yr	Supervisor's Name
Job Title	Reason for Leaving	Last Hrly Rate of Pay

Description of Duties

4 Employer	Address	Phone
From Mo/Yr	To: Mo/Yr	Supervisor's Name
Job Title	Reason for Leaving	Last Hrly Rate of Pay

Description of Duties

EDUCATION

Name of School/College	City/State	Major	GPA
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Name of School/College	City/State	Major	GPA
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Add Additional Paper if Needed

MILITARY

Branch of Service	Rank:	Period of Duty	Date of Discharge
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Describe your duties and training:

OFFICE Typing Speed _____ WPM

Indicate any and all office machine skills you have acquired through training and/or experience

REFERENCES

Name	Address	Business	Phone	Yrs Known

SUMMARY <i>Summarize other special skills and qualifications relating to the position for which you are applying</i>

Are you legally permitted to work in the United States? <i>(Employment will be contingent on providing proof of work authorization)</i>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are you less than 18 Yrs old? If yes, state age:	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Would you require a reasonable accommodation to perform your essential job duties? If yes, explain:	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
May we contact your present employer for references?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
May we contact your previous employers for references?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Have you ever been known by any other name(s) that our staff may require to verify your education and employment records as furnished in this application? If yes, identify name(s):	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Please be sure to sign this application and read the following statements carefully. Please attach your Resume and Cover Letter if you have one.

I certify that all information I have provided on this application is true and complete to the best of my knowledge. I understand that omitting requested information or giving false information on my application, in my interview, or in the process of my pre-employment evaluation, may result in rejection of my application or termination if I am hired.

I authorize investigation of all statements in this application as may be necessary in arriving at an employment decision. I understand that if employed, I will be required to abide by all company policies, standards, and regulations.

I understand that this application does not represent an offer of, or contract for, employment. I understand that employment with Wedgewood Cove is "at will", and that no guarantee of a job exists. If employed, I may terminate employment at any time for any reason, and Wedgewood Cove may terminate my employment at any time, for an reason.

Signature

Date