



# APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE  
EQUAL OPPORTUNITY EMPLOYER

## PERSONAL INFORMATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER? **YES** **NO**

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? **YES** **NO**

## EMPLOYMENT DESIRED

POSITION DESIRED: \_\_\_\_\_

DATE YOU CAN START: \_\_\_\_\_

SALARY DESIRED \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_

IF SO MAY WE INQUIRE WITH PRESENT EMPLOYER? \_\_\_\_\_

EVER APPLIED TO THIS COMPANY BEFORE? \_\_\_\_\_

WHERE? \_\_\_\_\_

WHEN? \_\_\_\_\_

REFERRED BY: \_\_\_\_\_

EDUCATION	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

## GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK \_\_\_\_\_

SPECIAL SKILLS \_\_\_\_\_

ACTIVITIES (CIVIL, ATHLETIC, ETC.) \_\_\_\_\_

EXCLUDE ORGANIZATIONS THAT INDICATE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR, OR NATION OF ORIGIN OF ITS MEMBERS.

U.S. MILITARY OR NAVAL SERVICE

RANK

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

**FORMER EMPLOYERS** (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE LAST ONE FIRST)

DATE MONTH & YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES: (GIVE THE NAME OF THREE PERSONS NOT RELATED TO YOU, WHOME YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS AQUAINTED

IN CASE OF EMERGENCY NOTIFY:

NAME	ADDRESS	PHONE

- I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, OF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.
- I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HERIN AND REFERENCES LISTED ABOVE TO GIVE YOU AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.
- I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOMENT IS FOR NO DEFINITE PERIOD AND MAY REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

DATE:

SIGNATURE:

DO NOT WRITE BELOW THIS LINE

INTERVIEW BY:		DATE
REMARKS		
NEATNESS		ABILITY
HIRED: YES NO	POSITION	<b>DEPARTMENT (CIRCLE ONE)</b> MANAGER GRILLE / CATERING STAFF GOLF SHOP STAFF CART / RANGE STAFF STARTER/RANGER GROUNDS CREW
SALARY	DATE REPORTING TO WORK	
Manager Initials	General Manager Signature:	

This form has been designed to strictly comply with State and Federal employment and Federal employment practice laws prohibiting employment discrimination. This application for employment form is for use Harbor Pines Golf Club.