The Ridge Golf Club

Application for Employment

GENERAL INFORMATION

LAST NAME	FIRST	MIDDLE	Are you 18 or olderY N Are you 16 or olderY N
STREET ADDRESS	CITY	STATE ZIP CODE	SOCIAL SECURITY NUMBER
PARENTS LAST NAME	FATHER	MOTHER	CURRENT PHONE NUMBER
PARENTS STREET ADDRESS	CITY	STATE ZIP CODE	ALTERNATE PHONE NUMBER
POSITION YOU ARE APPLYING FOR			DRIVERS LICENCE NUMBER
ARE YOU AVAILABLE FOR ANY SHIFT?	YES \Box NO \Box	(IF NOT, WHAT HOURS CAN YOU W	ORK?)
HOW MANY HOURS PER WEEK ARE YOU SEE	KING?	WHEN WILL YOU BE AVAILABLE TO WORK?	

SCHOOL INFORMATION

COLLEGE \Box HIGH SCHOOL \Box

NAME AND LOCATION OF COLLEGE OR HIGH SCHOOL

EMPLOYMENT EXPERIENCE

BEGIN WITH YOUR PRESENT OR MOST RECENT JOB. INCLUDE ANY JOB-RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES. YOU MAY EXCLUDE ORGANIZATIONS WHICH INDICATE RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, HANDICAP OR OTHER LEGALLY PROTECTED STATUS.

EMPLOYER #1	DATES	EMPLOYED	WORK PERFORMED				
	FROM	ТО					
ADDRESS							
TELEPHONE NUMBER(S)		ATE/SALARY					
	STARTING	FINAL					
JOB TITLE SUPERVISOR							
-							
REASON FOR LEAVING							
EMPLOYER #2	DATES EMPLOYED		WORK PERFORMED				
	FROM	ТО					
ADDRESS							
TELEPHONE NUMBER(S)	HOURLY F	RATE/SALARY					
	STARTING	FINAL					
JOB TITLE SUPERVISOR							
REASON FOR LEAVING	1						
	DEEE	DENCES					
REFERENCES							

LIST BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR. NAME CITY AND STATE BUSINESS PHONE NUMBER YEARS ACQUAINTED

1. 2

IN CASE OF EMERGENCY NOTIFY (NAME/ADDRESS/PHONE NUMBER)

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME.

SIGNATUI	ЪП
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OFFICE USE ONLY

PAY RATE

DATE

DATE HIRED COMMENTS

TRAINING DATE