



APPLICATION FOR EMPLOYMENT

DATE _____

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
NUMBER STREET CITY STATE ZIP

SOCIAL SECURITY # _____ TELEPHONE # _____

IF UNDER 18, PLEASE LIST AGE _____ WHEN ARE YOU AVAILABLE TO START? _____

HOW MANY HOURS CAN YOU WORK WEEKLY _____ NIGHTS/WEEKENDS _____

POSITION DESIRED FULL TIME ONLY _____ PART TIME _____
Fairway Mower Operator _____ Tee Mower Operator _____ Weekend Maintenance _____ Laborer _____
Bartender _____ Beverage Cart Server _____ Banquet Server _____ Assistant Golf Professional _____
Cart Attendant _____ Marshal _____ Starter _____ Janitor _____

TYPE OF SCHOOL _____ NAME OF SCHOOL _____ LOCATION _____

HIGH SCHOOL _____

COLLEGE _____

BUS. OR TRADE SCHOOL _____

PROFESSIONAL SCHOOL _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES _____ NO _____
IF YES, PLEASE EXPLAIN _____

DO YOU HAVE A DRIVER'S LICENCE? YES _____ NO _____
LICENSE NUMBER _____ STATE _____ EXPIRATION _____

PLEASE LIST YOUR WORK EXPERIENCE FOR THE LAST TWO YEARS BEGINNING WITH YOUR MOST RECENT JOB HELD.

NAME OF EMPLOYER _____ POSITION _____
Address name of last supervisor dates worked phone number

REASON FOR LEAVING (BE SPECIFIC) _____

NAME OF EMPLOYER _____ POSITION _____
Address name of last supervisor dates worked phone number

REASON FOR LEAVING (BE SPECIFIC) _____

USE THE FOLLOWING SPACE TO PROVIDE ANY ADDITIONAL INFO THAT YOU BELIEVE WILL ASSIST US IN MAKING A DECISION TO HIRE YOU.

MY SIGNATURE INDICATES THAT ALL OF THE INFORMATION ABOVE IS FACTUAL.

NAME _____ DATE _____

EMAIL ADDRESS _____