

APPLICATION FOR EMPLOYMENT



All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical/mental disability, severe/morbid obesity, medical condition, military/veteran status, genetic information, marital status, ethnicity, alienage or any other protected classification, in accordance with applicable Federal, State and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our Members and contributing to the financial success of the company, its Members and its employees. Equal access to programs, services and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative. (Please print)

Position(s) Applying For			
Print Name (Last, First & Middle)			Date of Application
Street Address		City	State Zip Code
Mobile Phone #	Alternate Phone #	E-Mail Address	

EMPLOYMENT EXPERIENCE

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time.

Name of Employer		Supervisor & Title	May we contact?
Street Address		Main Phone #	
Dates Employed (MM/YY)		Pay Rate	
From: / /	To: / /	Starting:	Final:
Job Title and Duties		Reason for Leaving	

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Please explain any gaps in your employment history

Please list any other experience, job related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment.

EDUCATION

Please describe your educational background in the table provided below.

	School Name	Years Completed	Diploma/ Degree (Yes/No)	Course of Study/Major	Specialized Training, Skills or Extra-Curricular Activities
Highest Level Completed					

PROFESSIONAL AND PERSONAL REFERENCES

Please list three references of individuals who are *not* related to you.

Company Name	Name & Title	Relationship	Phone # or E-Mail

GENERAL INFORMATION

1. Have you ever worked for Jonathan’s Landing Golf Club (JLGC) before? Yes No
 a. If yes, please give dates and position held: _____

2. On what date are you available to begin work? _____

3. Days/Hours available to work?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

4. Are you available to work: Full-time Part-time Seasonal

5. Minimum salary required: Per Hour \$ _____

6. If hired, would you have reliable means of transportation to and from work? Yes No

7. Are you at least 18 years old? Yes No
Note: If under 18, hire is subject to verification that you are of minimum legal age.

8. If hired, can you present evidence of your identity and legal right to work in this country? Yes No

9. Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation? Yes No
Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.

10. Were you referred to Jonathan’s Landing Golf Club for employment? Yes No
 a. If yes, please provide name and department.

I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

 Employee Name (Please Print)

 Date

 Employee Signature



Jonathan’s Landing Golf Club is an Equal Opportunity Employer and a Drug-Free Workplace