



Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, or any other legally protected status.

**** If Printing off and submitting - PLEASE PRINT CLEARLY ****

Position(s) applied for _____ Date _____ / _____

How did you find out about this job? Newspaper Employee Walk-in Relative Other _____

Applicant Information

First Name _____ Middle _____ Last _____

Street Address _____ City _____

Prov/Postal Code _____ Phone (____) _____

If hired, do you have a reliable means of transportation to get to work? _____

Are you legally eligible for employment in the Canada? _____

List any special skills or training: _____

Employment Information

Are you seeking full time, part time or temporary employment? _____

What hours and shift(s) would you prefer to work? _____

Any times you are **not** available to work? _____

Are you willing to work overtime? _____ Weekends? _____ Holidays? _____

Are you currently employed? _____ If hired, when would you be able to start? _____

Have you ever worked for a golf course before? _____

List any friends or relatives employed by this company: _____

Education (circle highest level achieved)

Elementary:

Name of School: _____

Location of School: _____

High School:

Name of School: _____

Location of School: _____

College:

Name of School: _____

Location of School: _____

Degree & Major: _____

Minor: _____

Work History *(please begin with most recent)*

1. Company _____ Phone (_____) _____
Address _____ City/Prov/Postal Code _____
Dates of Employment: From _____ To _____ Wage: Beginning _____ Ending _____
Job Title _____ Manager's Name _____
Describe duties briefly: _____
Specific reason for leaving: _____

2. Company _____ Phone (_____) _____
Address _____ City/Prov/Postal Code _____
Dates of Employment: From _____ To _____ Wage: Beginning _____ Ending _____
Job Title _____ Manager's Name _____
Describe duties briefly: _____
Specific reason for leaving: _____

3. Company _____ Phone (_____) _____
Address _____ City/Prov/Postal Code _____
Dates of Employment: From _____ To _____ Wage: Beginning _____ Ending _____
Job Title _____ Manager's Name _____
Describe duties briefly: _____
Specific reason for leaving: _____

4. Company _____ Phone (_____) _____
Address _____ City/Prov/Postal Code _____
Dates of Employment: From _____ To _____ Wage: Beginning _____ Ending _____
Job Title _____ Manager's Name _____
Describe duties briefly: _____
Specific reason for leaving: _____

Authorizations & At-Will Employment Agreement

(Please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and myself. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature _____ Date _____

Name (please print) _____