



Nakoma Golf Club

Employment Application

APPLICANT INFORMATION

| | | | |
|-----------------------------|-------|----------------|------|
| Name (First, Middle, Last): | | Home: () | |
| | | Mobile: () | |
| Street Address: | City: | State: | Zip: |
| Email Address: | | | |
| Other Names Used: | | | |

EMERGENCY CONTACT INFORMATION

| | |
|-----------------------------------------------|---------------------|
| In Case of an Emergency, please notify: _____ | Relationship: _____ |
| Address: _____ | Phone: _____ |

Position(s) Applied For: _____ Full Time Part Time Seasonal

Salary Desired: \$ _____ Available to start: _____

Days available for work: Monday Tuesday Wednesday Thursday Friday Saturday Sunday
(check all that apply)

Referral Source: Advertisement Employee _____ Member _____
 Walk-in Other: _____

Have you previously applied at Nakoma Golf Club? YES NO

Have you previously been employed by Nakoma Golf Club? YES NO

If yes, give dates and department: _____

Do you have any relatives currently employed by Nakoma Golf Club? YES NO

If yes, give name(s) and department(s): _____

Are you 18 or older? YES NO If not, state date of birth: ____/____/____

If under 18, can you provide a work permit? YES NO

If under 18, how many hours per week are you employed elsewhere? _____ hours

Do you have transportation to and from work? YES NO

Are you authorized to work in the US? YES NO

(You will be required to provide proof of identity and authorization within 72 hours of employment)

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? YES NO If no, describe any functions that cannot be performed: _____

Have you ever been convicted of a crime? YES NO

If yes, please explain: _____

EDUCATION

| Schooling Type | School Name And Address | Did you Graduate? | Type Of Degree |
|-----------------|-------------------------|----------------------------------------------------------|----------------|
| High School | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| College | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Grad School | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Other (specify) | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |

MILITARY SERVICE RECORD

| | | | | |
|--------------------------------------------------------------------------|---------|---------------|----------------|--------------------|
| War Veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO | Branch: | Date Entered: | Rank Attained: | Date of Discharge: |
|--------------------------------------------------------------------------|---------|---------------|----------------|--------------------|

EMPLOYMENT HISTORY

**Please complete the following section, starting with your most recent or current employment.
If you have provided a resume, you must still complete any information missing from the resume.**

| | | | |
|----------------------------------------------------------------------------------------|--------|---------------------|------------------|
| Current or Most Recent Employer: | | Position/Duties: | |
| Employer Address: | | | |
| Supervisor (Name/Title): | Phone: | Dates Employed: | |
| | | From: (Mo/Yr) _____ | To (Mo/Yr: _____ |
| Salary: Starting: _____ Ending: _____ | | Reason For Leaving: | |
| May We Contact This Employer: <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| | | | |
|----------------------------------------------------------------------------------------|--------|---------------------|------------------|
| Previous Employer: | | Position/Duties: | |
| Employer Address: | | | |
| Supervisor (Name/Title): | Phone: | Dates Employed: | |
| | | From: (Mo/Yr) _____ | To (Mo/Yr: _____ |
| Salary: Starting: _____ Ending: _____ | | Reason For Leaving: | |
| May We Contact This Employer: <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| | | | |
|----------------------------------------------------------------------------------------|--------|---------------------|------------------|
| Previous Employer: | | Position/Duties: | |
| Employer Address: | | | |
| Supervisor (Name/Title): | Phone: | Dates Employed: | |
| | | From: (Mo/Yr) _____ | To (Mo/Yr: _____ |
| Salary: Starting: _____ Ending: _____ | | Reason For Leaving: | |
| May We Contact This Employer: <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| | | | |
|----------------------------------------------------------------------------------------|--------|---------------------|------------------|
| Previous Employer: | | Position/Duties: | |
| Employer Address: | | | |
| Supervisor (Name/Title): | Phone: | Dates Employed: | |
| | | From: (Mo/Yr) _____ | To (Mo/Yr: _____ |
| Salary: Starting: _____ Ending: _____ | | Reason For Leaving: | |
| May We Contact This Employer: <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

Please read the following statement carefully:

I agree to comply with all of the rules of Nakoma Golf Club. I certify that the facts contained in this application are true and complete to the best of my knowledge, and understand that, if employed, any falsification or omission of information provided on this application, or while interviewing, will be grounds for dismissal, even if not discovered until after my employment begins with this organization. I authorize Nakoma Golf Club to contact any previous employers, except as specified on this form, and I release both Nakoma Golf Club and my previous employers from any liability arising from disclosure of information concerning my employment history. I understand and agree that if hired, my employment with Nakoma Golf Club is "at will" and is for no definite period. I may resign or be discharged at any time without prior notice and without cause.

Signature of Applicant: _____ **Date:** _____

Nakoma Golf Club is an equal opportunity employer, and does not discriminate in hiring or employment on the basis of race, color, religion, national origin, age, gender, sexual orientation, marital status, disability status, veteran status, or any other federal and state protected status. No question on this application is intended to secure information to be used for such discrimination.

For Office Use Only

| | |
|------------------------------------------------------------------------|-------------------------------------------------|
| Interviewed by: _____ | Date: _____ |
| Remarks: _____ | |
| Neatness: _____ | Ability: _____ |
| Hired: <input type="checkbox"/> YES <input type="checkbox"/> NO | Position: _____ Department: _____ |