



sunrise golf

# EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

ESCENA GOLF CLUB

\_\_\_\_\_

Name (Last , First)			Date
Present Address	City	State	Zip
Permanent Address	City	State	Zip
Home Phone		Business or Cell Phone	

### EMPLOYMENT DESIRED

Position applying for	Date you can start	Salary desired
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### PERSONAL INFORMATION

Have you ever applied to or worked for our company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when:
Do you have any friends or relatives working for our company? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, state name(s) and relationship

Why are you applying for work with our company?  
\_\_\_\_\_

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, describe the functions that cannot be performed	

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/ employees to perform essential functions. Hire may be subject to passing a medical examination and to skill and agility tests.)

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

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale or doing so could create conflicts of interest.

\_\_\_\_\_  
\_\_\_\_\_

### EDUCATION, TRAINING, AND EXPERIENCE

High School Name	Address	City	State & zip
College/University	Address	City	State & zip
Vocational/Business School	Address	City	State & zip



**EMPLOYMENT HISTORY**

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer	Type of Business	Your Supervisor's Name	Dates of Employment
Address & Street	City	State & Zip	Telephone No.
Your Position and Duties		Reason for Leaving	
May we contact this employer for a reference?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Name of Employer	Type of Business	Your Supervisor's Name	Dates of Employment
Address & Street	City	State & Zip	Telephone No.
Your Position and Duties		Reason for Leaving	
May we contact this employer for a reference?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Note: attach additional page(s) if necessary.**

**REFERENCES**

List below two persons not related to you who have knowledge of your work performance within the last three years.

Name	Occupation	No. of Years Acquainted	Telephone No. (____)
Address & Street	City	State	Zip
Name	Occupation	No. of Years Acquainted	Telephone No. (____)
Address & Street	City	State	Zip

**Please read carefully, initial each paragraph and sign below:**

_____ Initials	I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and 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.
_____ Initials	I hereby authorize Sunrise Golf to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work record, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any all claims, demands or liabilities arising out of or in way related to such investigation or disclosure.
_____ Initials	I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for not definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.
_____ Initials	In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.
_____ Date	_____ Applicant's Signature