

SULLIVAN COUNTRY CLUB JOB APPLICATION

PERSONAL INFORMATION

FULL NAME: _____ DATE: _____
First Middle Last

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

E-MAIL: _____ PHONE: _____ SOCIAL SECURITY # UPON HIRE

START DATE AVAILABLE: _____ POSITION APPLIED FOR: _____

EMPLOYMENT DESIRED: FULL-TIME PART-TIME SEASONAL

EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S? YES NO*

HAVE YOU EVER WORKED FOR THIS EMPLOYER? YES* NO

*IF YES, WRITE THE START AND END DATES: _____

DO YOU HAVE THE FOLLOWING CERTIFICATIONS? (circle all that apply)

Food Protection Manager *Allergen* *Food Handler* *Bassett*

ARE YOU WILLING TO COMPLETE CERTIFICATIONS IF REQUESTED? YES NO

EDUCATION

HIGH SCHOOL: _____ CITY / STATE: _____

FROM: _____ TO: _____ GRADUATE? YES NO

COLLEGE/TRADE SCHOOL: _____ CITY / STATE: _____

FROM: _____ TO: _____ GRADUATE? YES NO DEGREE: _____

MILITARY SERVICE

ARE YOU A VETERAN? YES NO

BRANCH: _____ RANK AT DISCHARGE: _____

FROM: _____ TO: _____ TYPE OF DISCHARGE: _____

IF NOT HONORABLE, PLEASE EXPLAIN: _____

PREVIOUS EMPLOYMENT

EMPLOYER 1: _____ MAY WE CONTACT EMPLOYER _____
Company / Individual
E-MAIL: _____ PHONE: _____
ADDRESS: _____
Street Address City State Zip Code
JOB TITLE: _____ RESPONSIBILITIES: _____
FROM: _____ TO: _____ REASON FOR LEAVING: _____

EMPLOYER 2: _____ MAY WE CONTACT EMPLOYER _____
Company / Individual
E-MAIL: _____ PHONE: _____
ADDRESS: _____
Street Address City State Zip Code
JOB TITLE: _____ RESPONSIBILITIES: _____
FROM: _____ TO: _____ REASON FOR LEAVING: _____

REFERENCES (PROFESSIONAL ONLY)

FULL NAME: _____ RELATIONSHIP: _____
First Last
COMPANY: _____ TITLE: _____
E-MAIL: _____ PHONE: _____

FULL NAME: _____ RELATIONSHIP: _____
First Last
COMPANY: _____ TITLE: _____
E-MAIL: _____ PHONE: _____

FULL NAME: _____ RELATIONSHIP: _____
First Last
COMPANY: _____ TITLE: _____
E-MAIL: _____ PHONE: _____

BACKGROUND CHECK CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? YES NO

DISCLAIMER

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE _____ **DATE** _____

