# new logo small

# APPLICATION FOR EMPLOYMENT

# *An Equal Opportunity Employer*

*We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability or any other protected status. All qualified applicants will be given equal opportunity and selection decisions will be based on job-related factors.*

Answer each question fully and accurately. No action can be taken on this application until you have answered all relevant questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

##### PERSONAL

**Job Applied for** Job applied for **Today’s Date** Click or tap to enter a date.

Full Name

**Full Name**

Social Security Number

**Social Security Number**

Full Address

**Present Street Address City State Zip Code**

Telephone Number

**Telephone Number**

Cell Phone or Pager Number

**Cell Phone or Pager Number**

Email Address

**Email Address**

**Have you worked or attended school under any other names?** If yes, give name(s): Click or tap here to enter text.

**When could you start work?** Click or tap to enter a date.

**The type of employment you are currently seeking:** Choose an item.

**Please mark the shift(s) you are able to work:** Days [ ]  Evenings[ ]  Nights[ ]

**Are you 18 years of age or older?** (If you are hired, you may be required to submit proof of age.) Yes[ ]  No[ ]

**If hired, can you furnish proof you are eligible to work in the U.S.?** Yes[ ]  No[ ]

**Have you ever applied here before?** Yes[ ]  No[ ]  **If yes, when?** Click or tap here to enter text.

**Were you ever employed here?** Yes[ ]  No[ ]  **If yes, when?** Click or tap here to enter text.

**Do you have relatives currently working here?** Yes[ ]  No[ ]  **If yes, whom?** Click or tap here to enter text.

**Do you have a relative that is a member of FCC?** Yes[ ]  No[ ]  **If yes, whom?** Click or tap here to enter text.

**Have you ever been convicted of a felony?** Yes[ ]  No[ ]

**If yes, give details:**

 Click or tap here to enter text.

 (A “Yes” answer does not automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying is also considered.)

**How were you referred to us?**

 Employment Agency [ ]  Newspaper [ ]  (Specify) Click or tap here to enter text.

 Placement Service [ ]  Current Employer [ ]  (Specify) Click or tap here to enter text.

 Walk In [ ]  Other [ ]  (Specify) Click or tap here to enter text.

## EDUCATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name and Location of School or College | Course or Major | Did YouGraduate? | No. of Years Attended | Degree Obtained |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## FORMER EMPLOYERS/EXPERIENCE

(You may mark an “X” beside those employers you do not wish us to contact.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name and Address | Position/Job Responsibilities | Dates Employed | Starting Salary | Last Salary | Reason for Leaving |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## PERSONAL REFERENCES (Not Relatives)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Address | Phone | Business | Known How Long? |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## EMERGENCY CONTACT

|  |  |  |
| --- | --- | --- |
| Name | Address | Phone |
|  |  |  |

## SPECIAL SKILLS

**What skills, training, certification or licenses do you have that are related to the job for which you are applying?**

Click or tap here to enter text.

**PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING**

**Employer:** Findlay Country Club **Applicant:** Click or tap here to enter text.

1. **I CERTIFY** that the information I provided on this application is true, accurate and complete to the best of my knowledge. I understand that false or misleading information or material omissions on this application shall be grounds for denial of employment or immediate termination of employment, regardless of when or how it was discovered.

2. **I AUTHORIZE**: (1) Findlay Country Club to investigate information concerning the information I provided on this Application, including, but not limited to my previous employment, experience and education; (2) those persons and companies referenced above to freely provide information to Findlay Country Club, for which I hereby release each of these persons and companies which provide or receive information about me from any and all liability for any damage that may result from furnishing such information; (3) those persons and companies referenced above to accept a photocopy or facsimile copy of this page as my consent and release of liability for providing all requested information to Findlay Country Club; and (4) Findlay Country Club to request and receive a copy of my (i) criminal records, and (ii) driving records.

3. **I UNDERSTAND** that the employer may request an investigative consumer report from a consumer reporting agency. If such a report is sought, I understand that I will be asked to sign a separate consent form in compliance with the Fair Credit Reporting Act, 15 U.S.C. § 1681-1681u. This report may include information as to my character, reputation, personal characteristics, and mode of living obtained from interviews with neighbors, friends, former employers, schools, and others. I understand that I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

4. **I AGREE**, in consideration of my employment, to conform to all company rules and regulations and understand that these rules and regulations are subject to change from time to time at the employer’s unilateral discretion.

5. **I UNDERSTAND** that all employer property must be returned and any indebtedness to the employer must be paid on or before my last day of work. I authorize the employer to deduct from my final paycheck an amount necessary to satisfy any unpaid obligation.

6. **I UNDERSTAND** as a final step in the hiring process, an applicant may be subject to a pre-employment health review which may include screening for illegal drugs. Applicants who confirm positive on drug screening will not be considered for employment. If a job offer is made, it may be made contingent upon the success of the health review.

7. **I UNDERSTAND** and consent to any and all drug or alcohol testing which I may be subjected to by the employer, whether it be random, mandatory, incident specific or based on the employer's reasonable suspicion. I further understand that my participation in the employer's drug testing program is a mandatory condition of my employment and that refusal to participate may subject me to discipline, up to and including termination of employment.

8. **I UNDERSTAND and agree that my employment and compensation is at the will of the employer and myself and thus it may be terminated at any time with or without prior notice, with or without cause, at the option of the employer or myself, and I understand that no representative of the employer, other than the Board of Trustees or their designee, has authority to enter into any agreement contrary to the foregoing. I further understand that any agreement contrary to the foregoing must be in writing and signed by myself and the Board of Trustees or their designee to be effective.**

I have read, understand, and by my signature consent to these statements.

**Signature:** *Click or tap here to enter text.* **Date:** Click or tap to enter a date.

This Application for Employment will not remain active after the position applied for is filled.

***Our Mission: To offer our members an inviting family atmosphere, personalized services,***

***outstanding facilities and a commitment to excellence.***