

Renditions Golf Course Employment Application

Equal Opportunity Employer

INSTRUCTIONS

1. Please read "Application Information."

High School _____

College

Other

(If you need help in filling out this application form, please notify us so that we can try to accommodate your needs.)

2. Complete all pages of this form; please print clearly. Date: Home Phone: Other Phone: Social Sec. # Street: _____ City: ____ State: ____ Zip: _____ Are you 18 years or older? _____ Yes ____ No APPLICANT INFORMATION This Application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately. All qualified applicants will receive consideration without discrimination based on gender, marital status, race, religion, age, creed, national origin, or status as a qualified individual with a disability. A felony conviction will be considered but will not necessarily bar an applicant from employment. After a conditional offer of employment, and prior to reporting to work, you may be required to submit to a medical review and be examined by a medical professional designated by the Company. I certify that I have read and understand the APPLICANT INFORMATION paragraph on this form and that the answers and statements given by me on this application are complete and true to the best of my knowledge and belief. I understand that employment with Golf Course Name, if offered, will be at-will and may be terminated at any time for any reason, with or without notice or cause, by me or by Golf Course Name. I also understand that this arrangement may be changed only in writing, which is signed by the President of Golf Course Name. I understand that, if employed, I may from time to time receive wage increases, promotion, disciplinary action, performance evaluations, and the like, and that none of this is intended to alter the at-will nature of my employment. Date: Signature: Date available for work: ____ Position applying for: (Your application will be considered for this position only. If you wish to be considered in the future, please reapply.) Can you perform the functions of the job you are applying for: _____Yes _____ No (You may be asked to describe or demonstrate how you will be able to perform the functions of this job with or without reasonable accommodations.) Can you lawfully work in the United States? _____ Yes ____ No (Proof or lawful work status will be required upon employment.(i.e. valid drivers license, social security card, green card) Circle Highest Grade Completed: 7 8 9 10 11 12 13 14 15 16 16+ City, State Graduated Major

EMPLOYMENT REFERENCES

previous employers, the correct telephone numbers of past employers are critical. _____ Yes ____ No ____ Yes ____ No Most Recent Employer: Are you currently working for this employer? If ves. may we contact? City/State Phone No. Company Name Dates Employed: From _____ To ____ Job Title: _____ Supervisor's Name: _____ Salary ____ Per ____ Reason for Leaving _____ Duties: Second Most Recent Employer: Phone No. Company Name City/State Dates Employed: From _____ To ____ Job Title: _____ Supervisor's Name: ______ Salary ______Per _____ Reason for Leaving _____ Duties: OTHER REFERENCES Include only individuals familiar with your work ability. Do not include relatives. Address/Phone Name Years known/Relationship Please list any other skills, licenses or certificates that may be job related or that you feel would be of value to this job or company: _____ Have you ever applied to **Golf Course Name** before? ___ Yes ____ No Have you ever been employed by **Golf Course Name** before? ____Yes No _____ Yes ____ No Have you ever been convicted of a felony? If yes, please give date and describe: RELEASE REGARDING INFORMATION I authorize Golf Course Name and/or its agents, including consumer reporting bureaus, to verify any of the information I have given in my application for employment including, but no limited to, criminal history and motor vehicle driving records. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said person, schools, companies and law enforcement authorities from any liability for any damage whatsoever for issuing this information. Signature: _____ Date: _____

Your application may not be considered unless every question is answered. Since we will make every effort to contact