**NEEDHAM GOLF CLUB**

 **APPLICATION FOR EMPLOYMENT**

Needham Golf Club is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religious creed, national origin, ancestry, sex, age, disability, genetic information, sexual orientation, military or veteran status, gender identity or expression or any other legal recognized protected basis under federal, state or local laws, regulations or ordinances.

# PERSONAL INFORMATION

|  |  |
| --- | --- |
| NAME (LAST NAME, FIRST NAME) |  |
| PRESENT ADDRESS | APT. NO. | CITY | STATE | ZIP |
| PERMANENT ADDRESS | APT. NO. | CITY | STATE | ZIP |
| ARE YOU 18 YEARS OR OLDER?YES NO | PHONE | EMAIL |

**DESIRED EMPLOYMENT**

|  |  |  |
| --- | --- | --- |
| POSITION | DATE YOU CAN START | SALARY DESIRED |
| ARE YOU EMPLOYED NOW?YES NO | IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?YES NO |
| ARE YOU INTERESTED IN:PART-TIME FULL-TIME |  |
| EVER APPLIED TO NEEDHAM GOLF CLUB BEFORE?YES NO | POSITION? | WHEN? |
| EVER WORKED FOR NEEDHAM GOLF CLUB BEFORE?YES NO | POSITION? | WHEN? |
| REASON FOR LEAVING |
| NAME OF LAST SUPERVISOR AT NEEDHAM GOLF CLUB? |
| WHO REFERRED YOU TO THE CLUB?EMPLOYMENT AGENCY NEWSPAPER ADVERTISING FRIENDSTATE EMPLOYMENT OFFICE COLLEGE PLACEMENT SERVICE WALK IN OTHER |

**EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SCHOOL LEVEL | NAME & ADDRESS OF SCHOOL | NO. OF YEARS ATTENDED | DID YOU GRADUATE? | SUBJECTS STUDIED |
| GRAMMAR SCHOOL |  |  |  |  |
| HIGH SCHOOL |  |  |  |  |
| COLLEGE |  |  |  |  |
| TRADE, BUSINESS OR CORRESPONDENCE SCHOOL |  |  |  |

**MILITARY SERVICE**

BRANCH OF SERVICE

DUTIES IN SERVICE

**FORMER EMPLOYERS**

LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT. YOU MAY INCLUDE ANY VERIFIED WORK PERFORMED ON A VOLUNTEER BASIS. YOU MAY INCLUDE VERIFIABLE VOLUNTEER ACTIVITIES. YOU MAY EXCLUDE VOLUNTEER ACTIVITIES OR ANY MEMBERSHIPS TO ORGANIZATIONS

THAT MAY SUGGEST AGE, RELIGION, GENDER, GENDER IDENTITY OR EXPRESSION, RACE, COLOR, GENETIC INFORMATION, SEXUAL ORIENTATION, NATIONAL ORIGIN, ANCESTRY, DISABILITY, MILITARY, OR VETERAN STATUS, OR ANY OTHER PROTECTED STATUS LEGALLY RECOGNIZED UNDER FEDERAL STATE OR LOCAL LAWS.

|  |
| --- |
| NAME OF PRESENT OR LAST EMPLOYER |
| ADDRESS | CITY | STATE | ZIP |
| STARTING DATE | LEAVING DATE | JOB TITLE |
| WEEKLY STARTING SALARY | WEEKLY FINAL SALARY | MAY WE CONTACT YOUR SUPERVISOR?YES NO |
| NAME OF SUPERVISOR | TITLE | PHONE |
| DESCRIPTION OF WORK |
| REASON FOR LEAVING |

# FORMER EMPLOYERS

(CONTINUED)

|  |
| --- |
| NAME OF PRESENT OR LAST EMPLOYER |
| ADDRESS | CITY | STATE | ZIP |
| STARTING DATE | LEAVING DATE | JOB TITLE |
| WEEKLY STARTING SALARY | WEEKLY FINAL SALARY | MAY WE CONTACT YOUR SUPERVISOR?YES NO |
| NAME OF SUPERVISOR | TITLE | PHONE |
| DESCRIPTION OF WORK |
| REASON FOR LEAVING |

# FORMER EMPLOYERS

(CONTINUED)

|  |
| --- |
| NAME OF PRESENT OR LAST EMPLOYER |
| ADDRESS | CITY | STATE | ZIP |
| STARTING DATE | LEAVING DATE | JOB TITLE |
| WEEKLY STARTING SALARY | WEEKLY FINAL SALARY | MAY WE CONTACT YOUR SUPERVISOR?YES NO |
| NAME OF SUPERVISOR | TITLE | PHONE |
| DESCRIPTION OF WORK |
| REASON FOR LEAVING |

|  |
| --- |
| **REFERENCES**BELOW, GIVE THE NAMES OF THREE PERSONS TO WHOM YOU ARE NOT RELATED, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR |
| NAME | BUSINESS | PHONE | YEARS ACQUAINTED |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |

Are you legally authorized to work in the United States? \_ Yes

 No

Will you now or in the future require sponsoring for employment visa status (e.g. H-1B visa status)?

 Yes No

*(Note: If hired, you must complete Section 1 on Form I-9 required by the U.S. Immigration and Naturalization Service no later than the first day of work and provide the documentation required by Section 2 no later than three (3) business days after you start work).*

# IT IS UNLAWFUL IN MASSACHUSETTS TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

**Certification and Authorization**--Please read carefully.

I certify, under penalty of perjury, that all of the above information is true and complete, and I understand that any falsification or omission of information may result in denial of employment or, if hired, may result in termination regardless of the time lapse before discovery. (Initials)

I authorize investigation of all statements contained herein and the references, employers and schools listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Brae Burn Country Club from all liability for any damage that may result from utilization of such information. (Initials)

I understand that if I receive an offer of employment, such offer may be contingent upon the Club conducting a criminal history background check as is required by club policy and law. I understand that such a check may be a condition of employment at the Club. (Initials)

# I expressly agree and understand that, if employed, my employment is not for a specified term and may be terminated at will, with or without cause or liability, by either party without prior notice to

**the other. I also understand and agree that no representative of NEEDHAM GOLF Club has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.** (Initials)

Signature Date