Shadow Lake Golf and Racquet Club

			Date:		
Application for	Employment	:			
employer. The Compa on race (including trait religion (including we pregnancy, childbirth chealth decisions, famil certified medical marij over), veteran status, violence victim status, prohibits harassment	ny's policy is not to the historically asso- aring attire, cloth or related medical lial status, national uana patient), ger military status, se , and any other so of applicants for lit is the Company	o discriminate agains ociated with race, such ing or facial hair in conditions and transgal origin, physical or netic information (incluxual orientation, mar tatus protected by agemployment or emple's policy to comply w	c Club. Shadow Lake is tany applicant or employed as hair texture and paccordance with the tender status), gender idental disability (includiculary predisposing genital status, certain arrespolicable federal, state oyees, interns, volunterith all applicable federal fons.	byee, intern, volunter rotective hairstyles; enets of religion), dentity or expressioning gender dysphoratic characteristics or conviction record local laws. Shaders, etc., based or	er, etc., based , color, creed, sex (including n, reproductive ia and being a), age (18 and ords, domestic dow Lake also any of these
If you need assistan	ce in the applica y time. Applicants	tion or hiring processions who require reasons	g and employment process to accommodate a able accommodation du	disability, you ma	ay request an
		Personal Info	ormation		
Name:			Telephone:		
First	M.I.	Last			
Present Address:	Street, City, Stat	to and Zin			
Email address:	Street, City, Stat	e anu zip			
If under 18 years of ac	under 18 years of age, do you have a work permit?			☐ Yes	☐ No
Are you legally authori	ized to work in the	United States?		☐ Yes	☐ No
Will you now or in the	future require spo	nsorship for employm	nent visa status (e.g. H-	1B status)? ☐ Yes	☐ No
			uired to verify identity a		k in the United
		Employment	t Desired		
Position(s) applied for	or:		Date you can	start:	
Have you previously we employee or through a			the Company, in any of s	our locations eithe	r as an
When:		Superviso	or:		
Reason for leaving:					

General Information

f yes, state name(s) a	and their work location:			
Are you available to wo	ork overtime as needed?	☐ Yes	□ No	
Are you available to wo	ork weeknight?	☐ Yes	☐ No	
Are you available to wo	ork weekends?	☐ Yes	□ No	
•		eferral Informa	tion	
		elellal IIIIOIIIIa	HOH	
How did you learn abou	ut the Company?			
Source		Name of Referr	ing Employee or Source (f applicable)
☐ Current Employee	<u></u>			
☐ Newspaper Ad				
LinkedIn				
☐ LIIIKeuiii				
☐ Company website				
☐ Company website☐ Other				
_		Wards Extraction		
Other		Work Experien		ional sheets of paper
Other	rience (starting with your mo	ost recent emplo	ce byer). You may attach addit	ional sheets of paper.
Other List all your work exper Dates Employed:	rience (starting with your mo	ost recent emplo		ional sheets of paper.
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Dates Employed:	Employer Information:	
From:	Name of Employer:	
	Address:	
To:	Job Title:	
	Name of Supervisor:	
	Phone Number:	
Briefly describe your job	duties and work experience:	
	Education ted: Mathematical Content of the second of t	<u>College</u> 12
Degree Obtained: License, Vocational or	r Trade Training:	
License, Vocational or	Professional References of three persons not related to you, whom you have known	professionally at least three years. elephone Years Known
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Applicant's Statement

THIS APPLICATION IS NOT COMPLETE UNTIL IT IS FULLY COMPLETED, SIGNED AND ALL STATEMENTS BELOW HAVE BEEN READ AND INITIALED.

Initial: I certify that all the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.
[Insert the following if the employment relationship is at-will: Initial: I recognize that this employment application is not an offer of employment. I agree that if I am hired by the Company, I will be an at-will employee, meaning that either the Company or I may end the employment relationship at any time with or without cause or notice. I understand that only the General Manager of the Company, and no manager, supervisor, or other representative of the Company, has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the at-will employment relationship, and with respect to any agreement entered into by the General Manger, any such agreements must be in writing and signed by the General Manager and by me or my authorized representative.
Initial: I further understand and agree that, except for my at-will employment status, if hired, my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by the Company.
Initial: I understand that if I am offered employment, I may be required to sign a non-solicitation and nondisclosure agreement, as a condition of the employment.
Initial: I understand that the Company may share the information contained in this application with other Company employees for employment and administrative purposes and hereby consent to such transfer.
Initial: I hereby authorize, to the extent allowed by applicable federal, state and local laws, the Company to conduct its own investigation of my references, employment history and education and, further, authorize the references and prior employers I have listed to disclose to the Company information related to my employment history and qualifications for the position for which I am applying, without giving me prior notice of such disclosure.
Initial: I understand and expressly agree that if employed by the Company, storage areas provided for me (locker, desk, etc.) are open to investigation by the Company without prior notice to me.
Initial: I understand that the Company may not ask or require applicants to disclose past salary, wages or other compensation.
My signature below certifies that I agree to be bound by the terms and conditions stated in this application, which contains all the understandings between the Company and me concerning the topics addressed herein, and supersedes any prior inconsistent understandings between the Company and me on such issues.
Date: Applicant's Signature:
This application will only be considered for one year. If you have not been hired within one year days of submitting this application and you wish to continue to be considered for employment, you must complete another application.