



Date: \_\_\_\_\_

## Application for Employment

We appreciate your interest in Shadow Lake Golf and Raquet Club. Shadow Lake is an equal employment opportunity employer. Our policy is not to discriminate against any applicant or employee, intern, volunteer, etc., based on race, color, sex, religion, national origin, age (40 and over), disability, military status, genetic information or any other basis protected by applicable federal, state, or local laws. Shadow Lake also prohibits harassment of applicants for employment or employees, interns, volunteers, etc., based on any of these protected categories. It is our policy to comply with all applicable federal, state, and local laws respecting consideration of unemployment status in making hiring decisions.

Shadow Lake offers reasonable accommodations in the hiring and employment process for individuals with disabilities. If you need assistance in the application or hiring process to accommodate a disability, you may request an accommodation at any time by contacting Ryan P. Kunzer, General Manager, at (585) 385-2011

### Personal Information

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
*First M.I. Last*

Present Address: \_\_\_\_\_  
City, State, Zip

Email Address: \_\_\_\_\_

### Permission to Work

If under 18 years of age, do you have a work permit?  Yes  No

Are you legally authorized to work in the United States  Yes  No

Will you now or in the future require sponsorship for employment visa status (e.g. H-1B status)?  Yes  No

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required I-9 employment eligibility verification document form upon hire.

### General Information

Are you related to or in a close personal relationship with anyone now employed at the Company? An answer of "Yes" will not automatically disqualify you from the position for which you are applying.  Yes  No

If yes, state their name and work location: \_\_\_\_\_

Are you available to work overtime as needed?  Yes  No

If yes, are you available weekdays?  Yes  No

Weekends?  Yes  No

How did you hear about Shadow Lake? \_\_\_\_\_

### Employment Desired

Position(s) applied for: \_\_\_\_\_ Date you can start: \_\_\_\_\_

Have you ever worked for Shadow Lake before?  Yes  No

When: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

### Education

Highest Grade Completed:

1  2  3  4  5  6  7  8 |  9  10  11  12 |  1  2  3  4

Grade School
High School
College

Name of last school attended: \_\_\_\_\_

Degree obtained: \_\_\_\_\_

License, Vocational or Trade Training: \_\_\_\_\_

### Professional References

Please give the names of three people not related to you. Business references are preferred.

<b>Name</b>			
<b>Occupation</b>			
<b>Email</b>		<b>Telephone</b>	
<b>Years known &amp; Capacity</b>			

<b>Name</b>			
<b>Occupation</b>			
<b>Email</b>		<b>Telephone</b>	
<b>Years known &amp; Capacity</b>			

<b>Name</b>			
<b>Occupation</b>			
<b>Email</b>		<b>Telephone</b>	
<b>Years known &amp; Capacity</b>			

May we contact your present employer at this time?  Yes  No

## Employment History

List all your work experience (starting with your most recent employer). Please account for all periods of unemployment in this section. You may attach additional sheets of paper.

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:

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Reason for Leaving:

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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:

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Reason for Leaving:

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Dates Employed:	Employer Information:
From:	Name of Employer:
To:	Address:
	Job Title:
	Name of Supervisor: & phone number

Briefly describe your job duties and work experience:

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Reason for Leaving:

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**Job-Related Skills and Qualifications**

Please summarize your job-related skills and qualifications:

**Additional Information**

**\*If applying for a position that will include driving:**

If hired, can you provide a valid driver's license?  Yes  No

If hired, can you provide evidence of insurance or insurability, if applicable?  Yes  No

### 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.

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 Shadow Lake 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 Manager, 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 Shadow Lake.

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, Shadow Lake 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 of submitting this application and you wish to continue to be considered for employment, you must complete another application.