***Edgewood Country Club***

***Application for Employment***

Incomplete applications will not be considered.

To the applicant: We appreciate your interest in our company and assure you that we are interested in your qualifications. A clear understanding of your background and work history will aid us in seeking to place you in a position, which, in our judgement, best meets, your qualifications.

We are an equal opportunity employer and shall consider qualified applicants for all positions without regard to race, color, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or disability.

Michigan law requires employers to make accommodations to disabled applicants and employees where the accommodation does not impose an undue hardship on the employer.

Disabled applicants and employees may request an accommodation of their disability by notifying the company in writing of the need for accommodation within 180 days of the date the applicant/employee knows or should know that an accommodation is needed. Failure to properly notify the company will preclude any claim that the employer failed to accommodate the applicant/employee.

**PERSONAL DATA:**

|  |  |  |
| --- | --- | --- |
| **First Name (legal):** | **Middle Name:** | **Last Name:** |
|  |  |  |
| **Number and Street Name:** | **City:** | **State:**  | **Zip Code:** |
|  |  |  |  |
| **Date of Birth:** | **Social Security #:** | **Mobile Telephone:** | **Email Address** |
|  |  |  |  |

**GENERAL DATA:**

|  |  |
| --- | --- |
| **Are you 18 years or older?**  | **Yes  No**  |
| **Are you a U.S. Citizen?** | **Yes  No**  |
| **If you are not a U.S. Citizen, do you have the legal right to remain in the U.S.?** | **Yes  No**  |
| **Are you authorized to work in the United States?** | **Yes  No**  |
| **Have you been previously employed with Edgewood C.C.?****If yes, date(s): Supervisor Name(s):** | **Yes  No**  |
| **Have you filed an application before? If yes, date(s):** | **Yes  No**  |
| **List any friends or relatives working at Edgewood:** |

**EMPLOYMENT DESIRED:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Positions(s) Applied For:**  | **Kind of Work Sought:** | **Salary/Hourly Wage Desired:** | **Available Start Date:** |
|  | **Full Time Part Time** |  |  |

Please Specify hours and days desired (Note: For hourly positions **ONLY**)!!

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
| **Start Time:** |  |  |  |  |  |  |  |
| **End Time:** |  |  |  |  |  |  |  |
| **\*Days, hours, shifts vary depending on the need of business. Preferences are not guaranteed.** |

**EMPLOYMENT DATA: List last employer first.**

|  |  |  |
| --- | --- | --- |
| **Company Name:** | **City:** | **State:** |
|  |  |  |
| **Position Title:** | **Start and End Dates (mo/yr.):** | **Reason for Leaving:** |
|  |  |  |
| **Describe Responsibilities:** |
| **Starting Salary/Hourly Wage:** | **Ending Salary/Hourly Wage:** | **May we contact this employer?** |
|  |  |  **Yes No**  |
| **Supervisor’s Full Name:** | **Supervisor’s Title:** | **Supervisor’s Phone Number:** |
|  |  |  |

**Explain any period between positions:**

|  |
| --- |
|  |
| **Company Name:** | **City:** | **State:** |
|  |  |  |
| **Position Title:** | **Start and End Dates (mo/yr.):** | **Reason for Leaving:** |
|  |  |  |
| **Describe Responsibilities:** |
| **Starting Salary/Hourly Wage:** | **Ending Salary/Hourly Wage:** | **May we contact this employer?** |
|  |  |  **Yes  No**  |
|  |  |  |
| **Supervisor’s Full Name:** | **Supervisor’s Title:** | **Supervisor’s Phone Number:** |
|  |  |  |

**Explain any period between positions:**

|  |
| --- |
|  |
| **Company Name:** | **City:** | **State:** |
|  |  |  |
| **Position Title:** | **Start and End Dates (mo/yr.):** | **Reason for Leaving:** |
|  |  |  |
| **Describe Responsibilities:** |
| **Starting Salary/Hourly Wage:** | **Ending Salary/Hourly Wage:** | **May we contact this employer?** |
|  |  |  **Yes  No**  |
| **Supervisor’s Full Name:** | **Supervisor’s Title:** | **Supervisor’s Phone Number:** |
|  |  |  |

**Note: If you wish to describe additional employment, attach the above information for each position on a separate piece of paper.**

**EDUCATIONAL DATA:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education Type of****School:** | **School Name and Location:** | **Graduated:****Yes, No, Currently Attending** | **Diploma/Degree Title and Major:** |
| **College** |  |  |  |
| **Graduate School** |  |  |  |
| **Other****(Please Specify)** |  |  |  |

**REFERENCES: (DO NOT INCLUDE RELATIVES OR FORMER EMPLOYERS)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Company** | **Position Title and Relationship** | **Years Know** | **Telephone Number** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |

**MILITARY SERVICE RECORD:**

|  |  |
| --- | --- |
| **Have you had any experience in the Armed Forces of the United States or in a State National Guard? If yes, what branch? Date of Discharge:** |  **Yes  No**  |
| **Are you in the reserves?****If yes, date obligation ends:** |  **Yes  No**  |
| **Special/Technical Training:** |

**ADDITIONAL INFORMATION: use additional paper if you require more space for explanations.**

|  |  |
| --- | --- |
| **Have you ever been convicted of an ordinance violation, misdemeanor or felony within the last 10 years? If so, where, when and explain the nature of the offense.** |  **Yes  No**  |
|  |
|  |
|  |
| **A conviction does not automatically disqualify an applicant.** |
| **Do you have a valid driver’s license?****License Number: State:** |  **Yes  No**  |
| **If you do not have a valid license, how will you get to work?** |
| **Have you had any moving violations during the past three years? If yes, please explain:** |  **Yes**  **No**  |
| **Have you ever been discharged or suspended from employment? If yes, please explain** |  **Yes**  **No**  |
| **Have you ever been asked to resign your employment? If yes, list employer(s) and explain:** |  **Yes**  **No** |
| **Please list (2) emergency contacts:****Full Name:** | **Relationship to employee** |
| **List professional, trade, business or civic activities and offices held, excluding groups, the name or character of which indicate race, color, religion, sex, national origin, handicap, marital or veterans status.** |
|  |
|  |
| **State any additional information that you feel may be helpful to us in considering your application.** |
| **Do you have any special training, skills, qualifications or other experience that relate to the position(s) applied for?** |
|  |
| **How did you hear about Edgewood Country Club?** |

**Edgewood Country Club Background Check Policy**

All applicants that are 18 years old or over and have been offered a position at ECC or anyone that will have direct involvement with the Edgewood Country Club children will be required to have full investigative background check as well as a drug & alcohol screening.

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am aware of and agree to the above background check and drug & alcohol screening. I understand that the position I have been offered is contingent on the above background check results.

Date:\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please read carefully:**

**Disclaimer and Signature**

 **1. Certificate of Truthfulness.**

I certify that all statements on this application for employment are made truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed may result in dismissal.

 **2. Authorization for Employment Information.**

 I authorize the references I have listed above, and any prior or current employer of mine, to give you any and all information and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing such information to you.

 Also, I hereby waive written notice to me that employment information is being provided by any person or organization.

 **3. Employment at Will.**

 If hired, in consideration of my employment I agree to abide by rules and policies of Edgewood Country Club. I further agree that such employment and all compensation can be terminated with or without cause, and with or without notice, at any time at the option of either Edgewood Country Club or by myself. I understand that no agent or representative of Edgewood Country Club, other than its President, has any authority to enter into any agreement for employment contrary to the foregoing and that the President’s authority to do so may be exercised only by a written employment agreement signed by Edgewood country Club’s President.

Signature: Date: