

**Silver Lake Country Club**  
**An Equal Opportunity Employer**  
**Application for Employment**

Applicants should read the following information carefully before filling out any of the questions in this form. Title VII of the Civil Rights Act of 1964, as amended, prohibits discrimination in employment because of race, color, sex religion or national origin. It is also illegal to discriminate in employment of person because of their age if over 40 but less than 70 years of age, or because of a handicap.

Date:	Position Desired:
Name:	
	E-Mail:
Phone: (C)	Address:
Phone: (H)	City, State, Zip:

Are you 18 years or older? Yes or No    If not, Birthday: \_\_\_\_\_  
 Are you a US Citizen or an alien authorized to work in the US?    YES    or    NO  
 Circle the highest grade completed in school: 8 9 10 11 12    College 1 2 3 4  
 Have you ever been convicted (including a guilty plea) of a crime?    YES    or    NO  
 Is there any reason you may not be able to do the job for which you are applying?  
 YES or NO    If Yes, please explain: \_\_\_\_\_

Personal Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

**Previous Employment Record**

<b>**Most Recent**</b>	<b>Employed</b>	<b>Kind of Work:</b>	<b>Reason for leaving:</b>
(Company Name & Address)	<b>From:</b>		
	/ / 20__		
(Name of Supervisor & Phone)	<b>To:</b>		
	/ / 20__		
<b>**Previous**</b>	<b>Employed</b>	<b>Kind of Work:</b>	<b>Reason for leaving:</b>
(Company Name & Address)	<b>From:</b>		
	/ / 20__		
(Name of Supervisor & Phone)	<b>To:</b>		
	/ / 20__		

If you have any restrictions on hours that you may not work due to other commitments please note on the reverse side of the application.

Golf and banquet operation are open from 5:00 a.m. through 2:00 a.m. and are weekend oriented.

You will be required to work weekends and may be scheduled during any of the operation hours.

Please note that golf and banquet operation are seasonal. No one is assured year round employment. Employment is terminable at will, with or without cause and with or without notice.

All information on this form is true to the best of my knowledge and

I, \_\_\_\_\_ understand that falsification of information on this form will be subject the employee to immediate discharge.

I have thoroughly read and understand all information on this page.

\*Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Availability: