

RED HILL COUNTRY CLUB



APPLICATION FOR EMPLOYMENT

**8358 RED HILL COUNTRY CLUB DRIVE
RANCHO CUCAMONGA, CA 91730
(909) 982-1358**

Application for Employment

All applicants are considered for employment without regard to race, color, religion, sex, age, national origin or handicap factor. An application remains active for a 60-day period, after which to be considered a new form must be completed.

Please answer every question, print in INK. If there is a question you do not understand, please ask for assistance.

General Information

LAST NAME	First	Middle	Social Security No.
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HOME ADDRESS	Number	Street	City	State	Zip Code
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HOME PHONE	ALTERNATE PHONE	Indicate Age if under 18	CHECK THE FOLLOWING OPTIONS WHICH YOU WOULD CONSIDER: <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part Time <input type="checkbox"/> Hrs. Per Week
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For reference checking please indicate other name(s) under which you have worked or obtained education.

How were you referred to Red Hill Country Club?

Type of position desired:

Salary Desired:

Choice #1 _____

Choice #2 _____

Date Available for Employment

Choice #3 _____

Do you have the legal right to remain permanently in the U.S.? Yes No If no, Visa Type: _____

Will you work any shift: Yes No If no, list days or time you are NOT available: _____

Education / Military Background

Indicate Name and Complete Address of Last High School Attended

Graduated
Yes No

College-University-Other	Complete Address	No of Years	Major/Minor	Degree(s)
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Military History	Branch of Service	No of Years	Highest Rank/Grade	Active Duty Dates
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Indicate any additional education:

IN CASE OF AN EMERGENCY, PERSON TO NOTIFY:

NAME

ADDRESS

PHONE

Employment History

This portion of the application must be completed *even if supplemented by a resume*. Start with your most recent or current employment. References will be checked. Additional information may be written on a separate sheet and attached. PLEASE COMPLETE CAREFULLY.

Employer: _____ Salary _____ From _____ To _____
Address: _____ Phone () _____
Position and Duties: _____ Reason for Leaving: _____

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Employer: _____ Salary _____ From _____ To _____
Address: _____ Phone () _____
Position and Duties: _____ Reason for Leaving: _____

PERIODS OF UNEMPLOYMENT Describe each period of unemployment for the past 10 years in excess of 30-days duration.

From	To	Reason
Month Year	Month Year	

_____	_____	_____
_____	_____	_____
_____	_____	_____

Business / Personal Reference

Name	Address	Day Phone No.	Occupation	How long known?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Certification

Please read carefully before signing. If you have any questions regarding the following statements, please ask for assistance.

I certify that, to the best of my knowledge and belief, the answers which I have given to the foregoing questions, and the statements I have made in this application are correct and complete. I understand that false information contained in this application may be cause for dismissal.

I AUTHORIZE YOU TO COMMUNICATE WITH ALL OF MY FORMER EMPLOYERS, SCHOOL OFFICIALS, AND PERSONS NAMED AS REFERENCES. I HEREBY RELEASE ALL EMPLOYERS, SCHOOLS, AND INDIVIDUALS FROM ANY LIABILITY FOR ANY DAMAGE WHATSOEVER RESULTING FROM GIVING SUCH INFORMATION.

I UNDERSTAND THAT ANY OFFER OF EMPLOYMENT IS CONTINGENT UPON MY ABILITY TO PROVIDE SATISFACTORY REFERENCES, AND TO PROVIDE LEGAL DOCUMENTATION PROVING MY IDENTITY AND AUTHORIZATION TO WORK IN THE UNITED STATES.

In consideration of my employment, I agree to adhere to the policies of Red Hill Country Club and my employment and compensation can be terminated with or without cause, and with or without notice at any time, at the option of the Club or myself.

If employment results from this application, additional personal data will be required for determination of benefit eligibility and statistical purposes.

This application when completed and signed becomes the property of Red Hill Country Club.

_____ Date

Applicant's Signature

Applicant is not to complete any information in this section.

For Office Use Only (To be completed by Hiring Supervisor)

Start Date: _____ Position: _____ Department _____

Rate of Pay: _____ Per Hour/Salary Full Time [] _____ Hrs. Per Week

_____ Part Time []

Hiring Supervisor _____ Temporary []

_____ Payroll Department