

# APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE)

(AN EQUAL OPPORTUNITY EMPLOYER)

## *Sterling Golf Management, Inc.*

GOLF COURSE APPLIED TO: \_\_\_\_\_

### PERSONAL INFORMATION

DATE \_\_\_\_\_

NAME

Last First Middle

PRESENT ADDRESS

Street City State Zip

PERMANENT ADDRESS

Street City State Zip

PHONE # \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER?\*

YES \_\_\_\_\_

NO \_\_\_\_\_

### EMPLOYMENT DESIRED

POSITION \_\_\_\_\_

DATE YOU CAN START \_\_\_\_\_

SEEKING FULL-TIME OR PART-TIME? \_\_\_\_\_

AVAILABILITY \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_

DO YOU HAVE A VALID MA DRIVER'S LICENSE? \_\_\_\_\_

EVER APPLIED TO THIS COMPANY BEFORE? \_\_\_\_\_

### EDUCATION

	NAME AND LOCATION OF SCHOOL	# OF YEARS ATTENDED*	DID YOU GRADUATE?*
HIGH SCHOOL			
COLLEGE			

TRADE SCHOOL \_\_\_\_\_

\* The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

### FORMER EMPLOYERS: LIST LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST.

DATE MONTH/YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM _____ TO _____				
FROM _____ TO _____				
FROM _____ TO _____				
FROM _____ TO _____				

**REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU.**

NAME	ADDRESS	PHONE NBR.	YEARS AQUAINTED
1			
2			
3			

**PHYSICAL RECORD:**

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? YES \_\_\_\_\_ NO \_\_\_\_\_

PLEASE DESCRIBE: \_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY: \_\_\_\_\_  
NAME ADDRESS PHONE #

“I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT 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 SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE.”

DATE SIGNATURE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY DATE \_\_\_\_\_

HIRED? YES NO POSITION \_\_\_\_\_

SALARY/WAGE DATE REPORTING TO WORK \_\_\_\_\_

APPROVED: 1. 2. \_\_\_\_\_