

ROYAL PALM YACHT & COUNTRY CLUB

APPLICATION FOR EMPLOYMENT

WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER
AND A DRUG FREE WORK PLACE



APPLICANT'S STATEMENT

I understand that the Company is committed to providing equal opportunity in all employment practices, including but not limited to selection, hiring, promotion, transfer, and compensation to all qualified applicants and employees without regard to age, race, color, national origin, sex, religion, handicap or disability, or any other category protected by federal, state, or local law.

I authorize former and present employers, and professional, work, and personal references listed in the application and any other individuals I may name, to give the Company or its designee any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release such parties from all liability for any damages that may result from furnishing same to the Company. I also authorize the Company to provide truthful information concerning my employment with it to future employers and I agree to hold it harmless for providing such information.

I UNDERSTAND THAT THE COMPANY RESERVES THE RIGHT, TO THE EXTENT PERMITTED BY LAW, TO REQUIRE DRUG AND ALCOHOL SCREENING TESTS OF AN APPLICANT OR AN EMPLOYEE EITHER PRIOR TO EMPLOYMENT OR ANY TIME DURING EMPLOYMENT AND I HEREBY GIVE MY CONSENT TO ANY SUCH TESTS. I CONSENT TO THE RELEASE OF THE RESULTS OF ANY SUCH TESTS TO THE COMPANY OR ITS DESIGNEE. I RELEASE THE COMPANY AND ITS DESIGNEE FROM ANY AND ALL LIABILITY AND DAMAGES WHICH MAY RESULT OR ARISE FROM ANY DRUG TEST OR THE PROVISION OF INFORMATION IN CONNECTION WITH SUCH A TEST.

I understand that this employment application and any other Company documents are not promises of employment. Should I be employed, I understand that my employment will be on a trial period for ninety (90) days from the date of my hiring, and that I will remain an at-will employee thereafter. I further understand that, if I am employed, I can terminate my employment at any time with or without cause and with or without advance notice, and that the Company has a similar right. I understand that no manager, representative, or agent of the Company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, except that the General Manager may do so in writing.

The information given by me on this application and during the interview process is true and complete in all respects, and I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the Company's judgment) that I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I am hired.

I CERTIFY THAT I HAVE RECEIVED A SEPARATE WRITTEN NOTIFICATION THAT THE COMPANY MAY OBTAIN A CONSUMER REPORT ON ME. I AUTHORIZE THE COMPANY TO OBTAIN SUCH A REPORT OR REPORTS FOR USE IN CONNECTION WITH MY APPLICATION FOR EMPLOYMENT AND FOR OTHER EMPLOYMENT-RELATED REASONS. IF HIRED, THIS AUTHORIZATION SHALL REMAIN ON FILE AND SERVE AS ONGOING AUTHORIZATION FOR PROCUREMENT OF EMPLOYMENT-RELATED CONSUMER REPORTS AT ANY TIME DURING MY EMPLOYMENT. I UNDERSTAND THAT THE TERM "CONSUMER REPORT" INCLUDES, BUT IS NOT LIMITED TO, CREDIT CHECKS, CRIMINAL BACKGROUND CHECKS, DEPARTMENT OF MOTOR VEHICLE REPORTS, AND INVESTGATIVE CONSUMER REPORTS. I FURTHER UNDERSTAND THAT THE TERM "INVESTGATIVE CONSUMER REPORTS" MEANS A REPORT IN WHICH INFORMATION ON MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, OR MODE OF LIVING IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH MY NEIGHBORS, FRIENDS, OR ASSOCIATES, OR WITH OTHERS WITH WHOM I AM ACQUAINTED OR WHO MAY HAVE KNOWLEDGE CONCERNING ANY SUCH ITEMS OF INFORMATION.

THIS APPLICATION WILL BE CONSIDERED "ACTIVE" FOR A MAXIMUM OF THIRTY (30) DAYS
IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THESE STATEMENTS.

Date

Applicant's Signature

Each inquiry on this application must be fully answered or completed. Otherwise, you will not be considered for employment..

PERSONAL DATA

Last Name

First Name

Middle Name

Present Address Street and Number City, State, Zip	How long have you lived there: Years _____ Months _____	
Previous Address Street and Number City, State, Zip	How long have you lived there: Years _____ Months _____	
Telephone Number(s)	Social Security Number	Are you 18 years of age or older: <input type="checkbox"/> Yes <input type="checkbox"/> No
Position Desired: _____ Placement Desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary		
When are you available for work? _____		

PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Include part-time and seasonal employment. If self-employed, give firm name and supply business references. DO NOT ANSWER "SEE RESUME." Fill out this form **completely**. Be sure to account for all periods of time including military service and any periods of unemployment.

Current or Most Recent Employer		Dates Employed		Work Performed
		From (mo/yr)	To (mo/yr)	
Telephone Number(s)				
Address		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor Name & Title			
Reason for Leaving				
Previous Employer		Dates Employed		Work Performed
		From (mo/yr)	To (mo/yr)	
Telephone Number(s)				
Address		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor Name & Title			
Reason for Leaving				

BACKGROUND INFORMATION

Please explain fully any gaps in your employment history. Be sure to account for all periods of time including military service and any period of unemployment.

List any other names which you may have used and which will be necessary to verify prior to your employment: _____

If hired, can you provide proof that you are legally entitled to work in the U.S.? Yes No

If not, what steps must be taken for you to begin employment lawfully? _____

Have you ever been terminated or asked to resign from any job? Yes No

If yes, please explain circumstances: _____

May we contact your current employer? Yes No

If no, please explain: _____

Have you ever worked for this Company before? Yes No

If yes, please give dates and position: _____

Do you have any friends or relatives working here? Yes No

If yes, Name(s) and Relationship: _____

Have you ever plead "no contest," nolo, or guilty to a crime, or been convicted of a crime? Yes No

If yes, please give date and details of each: _____

Are any charges currently pending against you? Yes No

If yes, please explain: _____

Has any adjudication ever been withheld? Yes No

If yes, please explain: _____

Have you ever been a defendant in a civil suit on an intentional tort (assault, battery, false imprisonment, invasion of privacy, intentional infliction of emotional distress, intentional wrongful death)? Yes No

If yes, provide details: _____

(NOTE: Answering "yes" to these questions does not constitute an automatic bar to employment.)

Do you have any commitments to any other employer which may affect your employment? Yes No

If yes, explain: _____

EDUCATION

School Name	Years Completed (Circle)	Diploma/Degree	Describe Course of Study or Major	Describe Specialized Experience, Training, Skills, and Extra-Curricular Activities
High School	9 10 11 12			
College/University	1 2 3 4			
Graduate/Professional	1 2 3 4			

Trade or Correspondence				
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List any professional designations, certifications, licenses, or courses that may be applicable to the position for which you are applying:

DRIVING INFORMATION

Do you have a current valid driver's license? Yes No If yes, License No.: _____ State: _____ Expiration Date: _____

If you do not have a driver's license for the state in which you currently reside, why not? _____

Has your license ever been suspended or revoked? Yes No If yes, explain: _____

Do you have personal automobile insurance? Yes No If no, explain: _____

Have you ever been denied personal automobile insurance or has it ever been terminated or suspended? Yes No If yes, explain: _____

Have you ever been convicted, pled guilty or pled nolo to a charge of DWI or DUI? Yes No

Are any such charges currently pending against you? If yes to either question, explain: _____

Please list all moving traffic violations in the last five (5) years:

OFFENSE	DATE	LOCATION	COMMENTS

PERSONAL REFERENCES

Please list persons who know you well – not including any previous employers or relatives.

NAME	NUMBER OF YEARS KNOWN	OCCUPATION	ADDRESS (Street, City and State)	TELEPHONE NUMBER	RELATIONSHIP

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND ACCURATE.

Date

Signature of Applicant

THIS COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, SEX, AGE CITIZENSHIP, MARITAL STATUS, SEXUAL ORIENTATION, DISABILITY OR NATIONAL ORIGIN.