

# Legacy Pines Golf Club



## Employment Application

### Applicant Information

Full Name:  Last  First  M.I.  Date:

Address:  Street Address  Apartment/Unit #

City  State  Postal Code

Phone:  Email

Date Available:  Social Security No.:

Position Applied for:

Do you have your own method of transportation to arrive at Legacy Pines for 6:00 am or leave Legacy Pines at 9:30pm?

YES  NO

Are you a citizen of Canada? YES  NO  If no, are you authorized to work in Canada? YES  NO

Have you ever worked for this company? YES  NO  If yes, when?

### Education

High School:  Address:

From:  To:  Did you graduate? YES  NO  Diploma:

College:  Address:

From:  To:  Did you graduate? YES  NO  Degree:

Other:  Address:

From:  To:  Did you graduate? YES  NO  Degree:

### References

Please list one professional reference.

Full Name:		Relationship:	
Company:		Phone:	

### Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

### Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_