

Applicant _____
Last First M.I.

Position Applying For _____

Date _____

Mount Vernon Country Club Application for Employment



Mount Vernon Country Club Application for Employment

We are an equal opportunity employer and do not discriminate on the basis of sex, age, race, religion, national origin, disability or veteran status.

All information requested on application must be complete in order for this application to be considered.

1. Full name _____
(Last) (First) (M.I.)
2. Home phone (____) _____
3. Address _____
(Street Address) (Apt. #)
4. Business phone(____) _____
5. Social Security Number _____
6. Email Address _____
7. Position applying for: a. _____ b. _____
8. How were you referred: Newspaper _____ Internet _____
(Name of Paper) (Web Site)
- MVCC Referral _____ Other _____
(Name of Person)
9. Date available _____ 10. Salary expected _____ 11. Are you a U.S. Citizen? Yes No
12. If not a U.S. Citizen, are you eligible to work in the U.S.? Yes No Eligibility Limits From _____ to _____
13. Any restrictions on traveling? Yes No If yes, why? _____
14. Indicate which shift(s) you are available to work: ___ Mon. ___ Tue. ___ Wed. ___ Thur. ___ Fri. ___ Sat. ___ Sun.
 Day Evening
15. Check which job status you will accept, if offered: Regular Full-time Regular Part-time Other _____
16. Have you ever been convicted of a misdemeanor or felony after you turned 18 years old? (exclude minor traffic violations) Yes No
- If yes, list date(s) for all and explain: _____

17. **EDUCATION** a. Did you graduate from high school? Yes No b. If no, do you have a GED? Yes No
 Date GED Obtained _____

Type	School Name City & State	Degree	Major or Specialty	Graduated Yes or No
<i>High School</i>				Y N
<i>College</i>				Y N
<i>College</i>				Y N
<i>Technical/Trade</i>				Y N

18. **U.S. MILITARY EXPERIENCE**
 Branch of Service _____ From _____ to _____
 Rank and type of service _____
 Training/Experience Received _____
 Type of Discharge: Honorable Other Please Explain _____

19. **EXPERIENCE** – Starting with the most recent, describe ALL paid work and military experience. Highlight your knowledge, skills and abilities which best demonstrate your qualifications for positions at the Mount Vernon Country Club.

May we contact your present employer? Yes No

Employer	Duties (please be specific):
Address	
Telephone	
Type of Business	
Immediate Supervisor	
Job Title	Equipment used
Salary (start)\$ (finish)\$	
Dates (mo/yr) to (mo/yr)	Reason for leaving

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Additional work experience related to job you are applying for: _____

If there are periods of time between jobs when you were not actively employed, please explain the dates and reasons:

20, ADDITIONAL SKILLS :

APPLICANT'S STATEMENT

I hereby certify that all entries on this employment application and any attachments are true and complete to the best of my knowledge, and I agree that any intentional falsification of information herein, regardless of time of discovery, shall be sufficient cause for dismissal or refusal of employment at the Mount Vernon Country Club. I understand that the employer follows an employment at will policy, and should I be offered and accept employment, that I or the employer may terminate my employment at any time, and for any reason consistent with applicable law; this employment at will policy cannot be changed verbally or in writing, unless specifically authorized in writing by the Chief Executive Officer of this organization. I agree that this application is not a contract of employment. I understand that this application will be retained for a period of one year. I understand that all information on this application is subject to verification and I consent to references and former employers and educational institutions listed being contacted regarding this application except for my present employer, if so noted. I understand that if my references on work or school history prove to be different from what I have documented, this application will be considered invalid. I agree to release to the Company or its designated agents all medical information, including but not limited to, files, reports, x-rays, evaluations and opinions held by medical personnel, to the extent such information is job related and consistent with the Company's business needs. I acknowledge that this is a general release and that if hired, it remains in effect for the duration of my employment. In the event of my personal indebtedness to the Company, I authorize the Company to withhold from my wages such amounts as permitted by law to satisfy my obligation to the Company. Each offer of employment shall be conditioned upon the passing of a physical examination and drug screen performed by a physician or medical provider of the Mount Vernon Country Club's choice. The Company will not hire any applicant that fails to pass, or who refuses to cooperate with, the testing procedure.

I acknowledge that I have read the above statement. I understand the statement in its entirety and agree to abide by the terms as stated.

Applicant Signature _____ Today's Date _____



ACKNOWLEDGEMENT OF MOUNT VERNON COUNTRY CLUB HIRING PROCESSES & PRACTICES

I, _____ (print name), understand and acknowledge that I may be subject to undergo a drug screen and/or background check at any time during my employment with the Mount Vernon Country Club. I understand that should I be requested to undergo a drug screen and refuse, or complete the drug screen and fail to pass, that my employment will be terminated. I also understand that all information I give to the Mount Vernon Country Club is subject to verification and, if any information I provide to them is found to be false, my employment will be terminated.

I understand in the future, should I seek re-employment with the Mount Vernon Country Club that I may be required to fully submit to any and all pre-employment screening processes as exist for any and all other candidates of the Country Club. This includes, but is not limited to, criminal background check, employment reference and verification, verification of High School graduation and/or GED completion, and drug screen/physical assessment requirements.

I understand that if I do not satisfactorily satisfy all of the above listed requirements, or any other in place at the time of my candidacy, that I will not be eligible for re-employment.

Candidate Signature

Date



APPLICANT CONSENT FORM

I, _____ hereby authorize the Mount Vernon Country Club to verify any and all of my personal educational history information. I understand this information is to be used for the sole purpose of verifying my education records through a background check, and not to be used for any purpose other than that verification. I also understand that this is a voluntary step, and I have been advised through being provided with this document, that I can refuse to provide the information at this point in time. Finally, I understand that in the end, it is my sole responsibility to provide the Mount Vernon Country Club documentation and any other information deemed necessary, to certify my educational history.

Signature of Applicant

Date

Printed Name

Date of Birth

Year of Graduation

Name of High School or the State where you obtained G.E.D.