

Employment Application Form

Lake Miltona Golf Club



Personal Information

First Name _____ Middle Initial _____ Last Name _____
Address _____ City, State _____ Zip _____
Telephone Number _____ Cell Phone Number _____
E-Mail Address _____

Employment Desired

Position(s) applying for: 1. _____ 2. _____

Employment Sought: 40-30 hours/week less than 30 hours/week

Date you can begin: _____ Salary desired: _____

If student, School ending date: _____ Fall starting date: _____

Are you currently employed? Yes No

If yes, may we contact employer? Yes No

Can you, at the time of employment, submit verification of your legal right to work in the United States?
 Yes No

Education

High School _____ Location _____ Graduate? Yes No

College _____ Location _____ Graduate? Yes No

College _____ Location _____ Graduate? Yes No

Trade/Business/Graduate School _____

Location _____ Graduate? Yes No

Employment History — *list most recent first*

Company Name _____ Supervisor _____

Telephone No. _____ Dates of Employment _____

Reason for Leaving _____

Company Name _____ Supervisor _____

Telephone No. _____ Dates of Employment _____

Reason for Leaving _____

Company Name _____ Supervisor _____

Telephone No. _____ Dates of Employment _____

Reason for Leaving _____

References — list 3 individuals [not related to you] who are familiar with your work-related skills.

Name	Position	Telephone No.	Years Acquainted

Please Answer:

Do you have reliable transportation?

What are your personal commitments for this upcoming summer?

Where did you hear about this position?

Please read carefully the section below before signing

I certify that I have completed this form and that the information contained herein is correct to the best of my knowledge. I understand that any omission or false information is grounds for dismissal. I authorize the references listed on this application to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise.

Signature: _____ Date: _____

After completing this application, please print and sign.

You can submit this to Lake Miltona Golf Club

by mail: 3868 County Rd 5 NE, Alexandria MN 56308

scan and email: info@lakemiltonagolfclub.com

fax: 320-852-7148