

SEVEN BRIDGES

Application for Employment

We appreciate your interest in our organization and assure you that we are an Equal Opportunity Employer. A clear understanding of your background and work history will aid us in determining the position (s) that best meet your qualifications

Name		Date							
Present Address									
Telephone No	Telephone No Cell Phone No								
Are you lawfully authorized to work in the United States?									
Are you 18 years or older? Yes No E-Mail Address									
How did you learn of Seven Bridges?									
Position(s) Applied for Rate of Pay desired									
Employment desired: Full time Part time Seasonal Hours available to work									
On what date are you	u available to start?		Monday Friday						
Are there any skills c	or qualifications which y	/ou feel especially	Tuesday	Saturday					
fit you for work with ι	us?		Wednesday Sunday						
			Thursday	_					
Type of School	Name of School	Location	Number of Years Completed	Major or Degree					
	ļ!	<u>├</u> '	!						
High School		1							
	ļ		P						
College									
	ļ/	ļ!	ļ!						
Other									
(Specify)									
	<u> </u>	·	<u> </u>						
		Military Service Record	b						
Have you ever been in the Armed Forces? L Yes L No If yes, what Branch									
Date of Duty: From To									
List any special duties or training:									
Are you are member of the National Guard? Yes No									
Personal References									
Please list two references other than relatives or previous employers									
Name Name									
Position Position									
			Company						
Phone Number		Phone Nur	Phone Number						

Work Experience

Start with your most recent job. You may include military service assignments and volunteer activities. If you were self employed please give firm name.

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Nome of Employer	From		То		Name of our any ison				
Name of Employer Address	Mo.	Yr.	Мо	Yr.	Name of supervisor				
Add(635									
City, State, Zip Code									
Phone Number	Your la	Your last job title:							
Reason for Leaving:									
List Jobs Held:									
	From		То						
Name of Employer	Mo.	Yr.	Мо	Yr.	Name of supervisor				
Address	100.	11.	IVIO						
City, State, Zip Code									
hone Number Your last jo		ist job tit	title:						
Reason for Leaving:									
List Jobs Held:									
	From		То						
Name of Employer			10		Name of supervisor				
Address	Mo.	۲r.	Mo. Yr.		·				
	100.	11. 1	10.	11.					
City, State, Zip Code									
Dhono Numbor	Your Last job title:								
Phone Number	— '								
Reason for Leaving:									
List Jobs Held:									
Have you been previously employed by Seven Bridges Golf Club? 🛛 Yes 🌐 No 👘 If yes, when and in what capacity?									
I understand that any omission or misrepresentation in this application, or my resume may result in termination of employment. I hereby give authorization to conduct any necessary and reasonable investigation with respect to my application and release this company, my									
former employers, and personal references from any liabili									
employment or character. I understand that if offered employment, I will be an employee at will, and my employment is not for a definite									
period, and that all terms and conditions of employment are subject to change without notice. I further understand that if offered employment, I will be bound by all company policies and procedures.									
Signed									
Date									