



13722 Champions Dr., Houston, TX 77069
 (281) 880-2243 Direct (281) 444-2042 Fax
 Email: cnigliazzo@championsgolfclub.com

APPLICATION FOR EMPLOYMENT

It is the policy of Champions Golf Club to provide equal access to programs, services and employment to all persons. The Club prohibits any discrimination based on age, race, color, physical or mental disability, religion, gender, national origin, military status or other protected classification.

POSITION (S) APPLIED FOR: _____ TODAY'S DATE: _____

NAME: _____ SOCIAL SECURITY #: - - -
 (LAST) (FIRST) (Mi)

ADDRESS _____
 (STREET) (CITY) (STATE) (ZIP)

TELEPHONE _____ Referral Source: _____

IF HIRED, CAN YOU PROVIDE DOCUMENTATION THAT YOU ARE AUTHORIZED TO WORK IN THE U.S.? Yes No

ARE AUTHORIZED TO WORK IN THE U.S.? Yes No

WHAT IS YOUR DESIRED SALARY RANGE? \$ _____ DATE AVAILABLE FOR WORK: ____ / ____ / ____

TYPE OF EMPLOYMENT DESIRED: PART-TIME FULL-TIME SEASONAL TEMPORARY

ARE YOU EMPLOYED NOW? Yes No IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? Yes No

HAVE YOU EVER BEEN EMPLOYED BY THIS COMPANY? Yes No WHEN? _____

IS THERE ANY INFORMATION WE WOULD NEED ABOUT YOUR NAME OR USE OF ANOTHER NAME, FOR US TO BE ABLE TO VERIFY YOUR WORK RECORD: Yes No PLEASE SPECIFY: _____

EMPLOYMENT HISTORY (STARTING WITH YOUR MOST RECENT EMPLOYMENT, PLEASE COMPLETE BELOW:

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY (Starting/Final)	TITLE/POSITION (Starting/Final)
FROM		\$	
TO		\$	
SUPERVISOR	TELEPHONE NO. ().	WHY DID YOU LEAVE?	
FROM		\$	
TO		\$	
SUPERVISOR	TELEPHONE NO. ()	WHY DID YOU LEAVE?	
FROM		\$	
TO		\$	
SUPERVISOR	TELEPHONE NO. ().	WHY DID YOU LEAVE?	
FROM		\$	
TO		\$	
SUPERVISOR	TELEPHONE NO. ().	WHY DID YOU LEAVE?	

CRIMINAL RECORD INFORMATION: ALL APPLICANTS: EXCLUDE ANY RECORDS EXPUNGED, ANNULLED, SEALED, OR DISCHARGED UNDER FIRST-OFFENSE LAW.

Have you ever been convicted of or pled guilty or no contest to a crime? (Answering yes is not an automatic bar to employment but will be considered in relation to specific job requirements.) Yes No

If yes, please explain

EDUCATION	NAME AND LOCATION OF SCHOOL (INCLUDE CITY & STATE)	YEARS COMPLETED	DEGREE/ DIPLOMA	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE OR UNIVERSITY				
COLLEGE OR UNIVERSITY				
OTHER				

SUMMARIZE ANY SPECIAL TRAINING, SKILLS, LICENSES AND/OR CERTIFICATIONS THAT MAY ASSIST YOU IN PERFORMING THE DUTIES OF THE POSITION FOR WHICH YOU ARE APPLYING.

U.S. MILITARY SERVICE

BRANCH OF SERVICE: _____ FROM: _____ RANK & TYPE
TO: _____ OF SERVICE: _____

TRAINING EXPERIENCE RECEIVED: _____

BUSINESS REFERENCES: LIST THREE INDIVIDUALS, NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST THREE YEARS, PREFERABLY *NOT* PREVIOUS SUPERVISORS.

	NAME	TITLE / ASSOCIATION	TELEPHONE	YEARS KNOWN
1				
2				
3				

APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the Club Manager of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I expressly authorize, without reservation, the employer, its representative, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other person, corporations or organization for furnishing such information about me. If my reported credit history adversely affects the Club's decision to employ me, I understand I will be provided with a notice of my rights to obtain a free copy of such credit history report and to dispute its accuracy with the credit reporting agency.

I hereby affirm that by submitting this application I agree to submit to tests for the presence of illegal drugs or alcohol, prior to and during employment, within a time period prescribed by the Club and as often as directed during employment. I hereby authorize the medical examiner to disclose to the Club any and all findings and conclusions arrived at in any tests performed either prior to employment or during employment.

I understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete and I-9 Form in this regard.

I certify that all the statements herein are true and understand that any information provide by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Agreement.

Signature of Applicant _____

Date _____