COTTONWOOD AND PALO VERDE COUNTRY CLUBS AT SUNLAKES



APPLICATION FOR EMPLOYMENT

GENERAL INFORMATION:											
Name: (Last)	(1	(First)		(Mi	(Middle Initial)		(Home Telephone)				
Address (Mailing Address)	((City)	(State)	(Zip	(Zip)		(Cell Telephone)				
E-Mail Address:	А	Are you legally entitled to work in the U.S.? Yes No									
		Have you ever been charged/convicted of a crime? Yes No					Yes No				
Referred by:	ferred by:				Explain:						
	D	Do you possess a valid Arizona driver's license? Yes No									
	D	o you have a r	elative cu	rrently er	nployed with	the As	sociation?				
Position Desired:					1		Yes No				
					Will Accept:		Shift:				
Are you able to perform essenti		• •					_				
applying for, with or without re	asonable acco	commodation? Yes N			No Part-Tim		Day				
Full-Time							Swing				
Temporary						iry	Graveyard				
							Rotating				
Have you ever worked for Sun Lakes HOA#2 before? Yes No					If yes, when?						
Have you ever worked for any S	Sun Lakes HO	A's before?	Yes	No	If yes, when	n?					
	Φ					1.1					
Salary Desired:	\$		Date Available:								
EDUCATION AND TRAININ	G:										
High School Graduate or Gener	al Education ((G.E.D.) Test H	Passed	Yes N	lo						
If no, list the highest grade com	pleted:										
COLLEGE, BUSINESS SCHO	OOL (Most Re										
Name and Location	Dates			Gradu	ate						
	Attended										
	Month/Year	Quarterly or	Other		Degr		Major				
		Semester (Specify)			& Ye	ear	or Subject				
		Hour									
	From			Yes							
	То			No							
	From	<u> </u>		Yes							
				105							
	То			No							
		· · · · · · · · · · · · · · · · · · ·		·	•						

				Expiration Date			
Occupational License,	Number	Where Issue	Where Issued				
Certificate or Registration							
Languages Read, Written or S		n English:					
VETERAN INFORMATION							
Branch of Service:	Date of Ent	ry:	Discharge Date:				
SPECIAL SKILLS: (List all	pertinent skills and equip	ment that you can	operate)	+			
WORK EXPERIENCE: (Mo	st Recent First) (Include v	oluntary work and	d military experiend	ce)			
Employer:	T 1 1 () -		ates – Month/Year			
Address:				To: /			
Job Title:			Hours Per Week				
Supervisor:							
Specific Duties:		-					
-							
Reason For Leaving		May We Co	ontact This Employer	? Yes No			
Employer:	Telephone: () -	Employment Da	ates – Month/Year			
Address:							
Job Title:							
Supervisor:	Number Employ	yees Supervised:	Last Salary:				
Specific Duties:			y				
1							
Reason For Leaving		May We Co	ontact This Employer	? Yes No			
Employer:	Telephone: () -	Employment Da	ates – Month/Year			
Address:			From:/	To:/			
Job Title:			Hours Per Week	•			
Supervisor:	Number Employ	Number Employees Supervised: Last Salary:					
Specific Duties:		-	•				
-							
Reason For Leaving		May We Co	ontact This Employer	r? Yes No			
L cartify the information contain	ad in this application is true	a correct and corre	lata Lundarstand th	at if amployed			

I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal.

Signature of Applicant: _____ Date: _____



APPLICANT AUTHORIZATION FOR REFERENCE CHECK

I authorize SUN LAKES HOA#2 to check my references by contacting persons or entities whom they deem to be an appropriate reference. I acknowledge that questions asked may be about my education and training background, character, attendance, disciplinary information, and reason for separation from former employment.

It is understood that any information given is to be used for the purpose of evaluating my acceptability for employment with SUN LAKES HOA#2.

_____ Date: _____