



EMPLOYMENT APPLICATION

PLEASE PRINT

Date: _____

Name: _____
Last First Middle

Present Address: _____
No. Street City State Zip

Home Phone Cell Phone Email Address

EMPLOYMENT DESIRED

Position applying for: _____ Full-time Part-time

Are you available for work on: Weekends Evenings Holidays Overtime

If hired, what date can you start work? _____ Salary desired: _____

PERSONAL INFORMATION

Have you ever applied to or worked for Toscana Country Club or any of our affiliates before? Yes No

If yes, when: _____

Do you have any friends or relatives working for Toscana Country Club or any of our affiliates? Yes No

If yes, state name(s) and relationship(s): _____

Are you able to perform the essential functions of the job for which you are applying? Yes No

If no, describe the functions that cannot be performed: _____

(Note: We comply with the ADA and applicable state law and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination and to skill and agility tests.)

Are you currently employed? Yes No If so, may we contact your current employer? Yes No

EDUCATION, TRAINING AND EXPERIENCE

School	Name / City, State	Number of years Completed	Did you graduate?	Degree or Diploma
High School	Name _____	_____	Yes	_____
	City, State _____		No	
College/ University	Name _____	_____	Yes	_____
	City, State _____		No	

Describe Course of Study: _____

Describe any specialized training, honors, apprenticeship, and skills: _____

Do you speak, write or understand any languages besides English? Yes No

If yes, which language(s)? _____

Describe any experience, training, qualifications or skills which you feel make you especially suited for work at Toscana Country Club? _____

EMPLOYMENT EXPERIENCE – Note: attach additional page if necessary.

Start with your present or most recent job and list all employment for the last 10 years and explain all gaps in your employment, attaching additional sheets if necessary. (Do not substitute your resume for this information.) Include any job-related service assignments and volunteer activities. You may exclude volunteer organizations, which indicate race, color, religion, gender, national origin, disability, sexual orientation, or other protected status.

Employer	Dates Employed From To	DESCRIPTION OF DUTIES
Address		
Telephone Number(s)		
Job Title	Supervisor	
Reason for Leaving (check) ☐ Layoff ☐ Involuntary Termination ☐ Resignation Explain:		

Employer	Dates Employed From To	DESCRIPTION OF DUTIES
Address		
Telephone Number(s)		
Job Title	Supervisor	
Reason for Leaving (check) ☐ Layoff ☐ Involuntary Termination ☐ Resignation Explain:		

Employer	Dates Employed From To	DESCRIPTION OF DUTIES
Address		
Telephone Number(s)		
Job Title	Supervisor	
Reason for Leaving (check) ☐ Layoff ☐ Involuntary Termination ☐ Resignation Explain:		

Explain any gaps in your employment history: _____

REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years.

NAME	OCCUPATION	TELEPHONE	NUMBER OF YEARS ACQUAINTED
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PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I authorize representatives of the Company to conduct a thorough investigation of my past employment and activities, and authorize all references provided in this application, as well as all other individuals whom the Company or its representatives may contact, to provide all relevant job-related information they have about me (in each case, unless otherwise required by law, without any notice to me of such disclosure). Notwithstanding the foregoing, I understand that the Company will not seek to obtain information about my salary history and information about any protected characteristics (i.e., mental or physical disability, age, ethnicity). I further understand that the Company will not seek background information about criminal convictions unless and until a conditional offer of employment is made, and then only in a manner consistent with local, state and federal "Fair Chance" laws. I agree to cooperate in any such investigation, and hereby release the Company, all persons and entities acting on its behalf, and all persons and entities requesting or supplying information to the Company, from any and actions, suits, claims, demands, liabilities, damages, costs and expenses (including, without limitation, reasonable attorneys' fees) arising from or in way relating to any lawful investigation or any information requested or supplied. I agree to execute any other documents necessary to enable the Company to accomplish the aims of this paragraph.

_____ I understand that nothing contained in the application or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between the Company and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and an authorized representative of the Company.

_____ I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and their legal authorization to work in the United States. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by law. Furthermore, I acknowledge and understand that it is the Company's policy, after an offer has been extended but before my hire date, to confirm with the Social Security Administration that my name and the social security number I have provided to the Company agree with Social Security Administration's records. If they do not match, I understand that the Company will provide me with two weeks to resolve the discrepancy. If the discrepancy cannot be resolved, I further understand that my conditional offer of employment will be withdrawn.

This application will be considered active for a maximum of 30 days. If you wish to be considered for employment after that time, you must reapply.

Date: _____

Signature of Applicant _____