

Will you be able to perform the specific job functions for the position for which you are applying? Yes _____ No _____

If no, what type (s) of special accommodation (s) would you require? _____

Have you ever injured an arm, leg, or any other body part that could be aggravated by working? Yes _____ No _____

If yes, please explain _____

List any skills related to the position for which you are applying _____

Have you ever been employed by the Eugene Country Club? Yes _____ No _____ If yes, give dates _____

Are you a relative of a *current* ECC employee or member? Yes _____ No _____ If yes who? _____

How are you related? _____ What department? _____

Do you foresee any problems meeting the attendance requirements of the position for which you are applying?

Yes _____ No _____ If yes, please explain _____

Are you currently employed? Yes _____ No _____ May we contact your current employer? Yes _____ No _____

School	Name and Address of School	Course of Study	Years Completed	Degree
High School				
College				
College				
Continued Education				

Employment History

Do not write in area marked office use only. Start with your most recent employment, and work your way back wards, including military assignments and volunteer activities. List any time periods when you did not work. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Office Use Only

Employer _____
Address _____
City & State _____
Job Title _____
Work Performed _____

Supervisor's Names _____ Phone _____
Reason for Leaving _____
Employed from _____ to _____
(mm/yy) (mm/yy)

References checked by _____
Date _____
Person Contacted _____
Title _____
Relationship to Applicant _____
Dates of employment correct? Yes ___ No ___
Eligible for rehire? Yes ___ No ___
Comments _____

Employer _____
Address _____
City & State _____
Job Title _____
Work Performed _____

Supervisor's Names _____ Phone _____
Reason for Leaving _____
Employed from _____ to _____
(mm/yy) (mm/yy)

References checked by _____
Date _____
Person Contacted _____
Title _____
Relationship to Applicant _____
Dates of employment correct? Yes ___ No ___
Eligible for rehire? Yes ___ No ___
Comments _____

Employer _____
Address _____
City & State _____
Job Title _____
Work Performed _____

Supervisor's Names _____ Phone _____
Reason for Leaving _____
Employed from _____ to _____
(mm/yy) (mm/yy)

References checked by _____
Date _____
Person Contacted _____
Title _____
Relationship to Applicant _____
Dates of employment correct? Yes ___ No ___
Eligible for rehire? Yes ___ No ___
Comments _____

The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. Eugene Country Club is a drug free work place, and I understand I will be asked to take a drug test. If employed, I agree to familiarize myself with the Rules and Policies of Eugene Country Club and to abide by those Rules and Policies.

Signature _____ Date _____

Release of Information

I hereby authorize the Eugene Country Club and its agents to contact my current and former employers for the purpose of verifying the information I have recorded on my employment application.

I further authorize my current and previous employers to release any relevant information concerning my work history and performance not prohibited by law.

I acknowledge that this release form does not in any way obligate Eugene Country Club to offer me employment.

Name (Please Print)

Date

Signature

Date

This certificate becomes part of the employee's personnel file

[SUBMIT](#)

Office Use Only

Date Hired _____ Rate of Pay _____

Supervisor Signature _____