



DIAMOND SPRINGS
— GOLF COURSE —

Diamond Springs Golf Course Application for Employment

It is our policy to comply with all applicable State and Federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability, or other protected classifications. Please carefully read and answer all the questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résum , but all questions must be answered.

Position applying for

Personal Data			
Name (Last, First, Middle)			D.O.B. (MM/DD/YY)
Street Address	City	State	Zip
Cell Phone Number		Email	
Date you can start working	Desired Wage (Hourly or Salary)	Do you have a High School Diploma or GED YES ___ NO ___	

Position Information Mark all that you are willing to work			
Hours Full Time ___ Part Time ___	Time Days ___ Evenings ___	Days Weekdays ___ Weekends ___	Status Regular ___ Temporary ___
Are you authorized to work in the U.S.? Yes ___ No ___			
Have you ever been convicted of a felony? Yes ___ No ___ If yes, explain:			

Education			
	School Name	Year Completed	Address/City/State
High School GPA: _____			
College/Trade GPA: _____			

References Please list three professional references not related to you, with full name, phone number, and relationship. If you do not have three professional references, then list personal, unrelated references.

Name	Phone	Relationship

Work History Start with your present or most recent employment and work back. Use a separate sheet if necessary. (Include paid and unpaid positions)

Job Title #1	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)
Company Name	Supervisor Name	Phone Number
City	State	Zip
Duties		
Reason for leaving	Starting Wage	Ending Wage

Job Title #2	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)
Company Name	Supervisor Name	Phone Number
City	State	Zip
Duties		
Reason for leaving	Starting Wage	Ending Wage

I certify that the facts that are set forth in this Application of Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The Employer may contact any listed references on this application.

I acknowledge and understand the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate an employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

Applicant Signature

Date

When finished please scan and email to events.dsgcgolf@gmail.com or mail/drop off to us at 3400 34th Street Hamilton, MI 49419