

GRAYHAWK GOLF CLUB EMPLOYMENT APPLICATION

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WORK EXPERIENCE

List employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. If you have less than four places of employment, include personal references to be contacted. May we contact your present employer? O Yes O No

Dates M / Y	Name and Address of Employer	Position Held and Supervisor	List Major Duties	Wages	Reason for Leaving
From:	Name:	Your Job Title		Starting	
	Address:				
То:		Supervisor	1	Final	
	Phone:				
From:	Name:	Your Job Title		Starting	
	Address:				
То:		Supervisor		Final	
	Phone:				
From:	Name:	Your Job Title		Starting	
	Address:				
To:		Supervisor		Final	
	Phone:				
From:	Name:	Your Job Title		Starting	
	Address:				
То:		Supervisor		Final	
	Phone:				
		MISCELLANEOUS			
Is there an	y additional information involving change of yo		to check your work reco	ord? O Yes C	No
Have you	ever been employed by Grayhawk Golf Club, Sur	nningdale Management Gro	up or any of its divisions	or subsidiaries	before? O Yes O No
If yes, plea	ase indicate: When?	Where?	F	Position?	
Have you	ever been convicted for a crime? O Yes O	No If yes, please explain:			
	DI FACE I	DEAD THIS STATEMENT	CADEFULLY		

I hereby affirm that the information given by me on this application for employment is complete and accurate. I understand that any falsification or omission will be immediate grounds for dismissal. I authorize a thorough investigation to be made in connection with this application concerning my character, general reputation, employment, educational background, and criminal record, whichever may be applicable. I understand what this investigation may include and I hereby authorize the release of documents and personal interviews with third parties, such as prior employers, family members, business associates, financial sources, friends, neighbors or others with whom I am acquainted. I further understand that I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of the nature and scope of the investigation.

It is understood that, as a condition of initial or continued employment, I agree to submit to such lawful examinations as medical, substance abuse, or other, as may be required by the company. The company will pay reasonable cost of any such examination which may be required.

If I am hired, I agree that my employment and compensation can be terminated with or without cause and without notice, at any time, at the option of Grayhawk or myself. I understand that no member of management or other representative Grayhawk has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. I have read and affirm as my own the above statements.

Signature Date No Smoking inside or within 20 feet or any entrance

EQUAL OPPORTUNITY EMPLOYER