

# Mike Rawitser Golf Shop

An equal opportunity employer  
Application For Employment

REQUEST# \_\_\_\_\_

PERSONAL

Last Name	First Name	Middle Init.	Social Security#
Street Address	City	State	Zip
Have you ever applied for employment with us? Yes <input type="checkbox"/> No <input type="checkbox"/> When: _____ Have you ever been employed with us? Yes <input type="checkbox"/> No <input type="checkbox"/> When: _____			Are you 18 yrs or older? Yes <input type="checkbox"/> No <input type="checkbox"/> If under 18, work permit required
Have you ever been convicted of a felony? (Conviction will not necessarily disqualify applicant from employment.) Nature of crime: _____ When & Where: _____ Disposition of case: _____			Yes <input type="checkbox"/> No <input type="checkbox"/>
If hired, can you present evidence of your U.S. citizenship, or proof of your legal right to live and work in this country? If not, please explain: _____			Yes <input type="checkbox"/> No <input type="checkbox"/>
In case of emergency please notify:	Name	Address	Phone #

EMPLOYMENT

Position desired:	Full Time <input type="checkbox"/>	Date Available for work:					
Monthly Income Desired:	Part Time <input type="checkbox"/>						
Indicate desired work schedule. Specify Hrs/Days available	SUN	MON	TUE	WED	THU	FRI	SAT
Are you acquainted with anyone who works for us? Yes <input type="checkbox"/> No <input type="checkbox"/> Name: _____ Relationship: _____	How were you introduced to this position? Employee <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Walk-In <input type="checkbox"/> Other (specify): _____						

REFERENCE

List three persons, other than relatives or former employers, who have knowledge of your work performance.

Name	Address	Occupation	Phone #

EDUCATION

SCHOOL	NAME & ADDRESS	YEARS COMPLETED	GRADUATED	DEGREE EARNED
High School		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
College		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
College		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Do you plan to continue your education? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when: _____ where: _____	U.S. Armed Services? Yes <input type="checkbox"/> No <input type="checkbox"/> Branch: _____ Relevant skills acquired: _____
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SKILLS

Do you possess any of the skills indicated below?

Typing Yes <input type="checkbox"/> No <input type="checkbox"/>	Computer Yes <input type="checkbox"/> No <input type="checkbox"/>	Cash register Yes <input type="checkbox"/> No <input type="checkbox"/>	Foreign language(s) spoken fluently:
WPM: _____	Type: _____	Other: _____	

List below last four employers, starting with present or most recent. Include full-time and pan-time.

EMPLOYMENT RECORD

Date	Month	Year	Employers' name & full address	Position, Salary & Supervisor	Reason for leaving
From					
To					
From					
To					
From					
To					
From					
To					

State any of your experiences, skills, or qualifications you feel would benefit the company.

STATEMENT


I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages or salary, be terminated at any time without any previous notice.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_