

# Five Seasons Family Sports Club Application for Employment

ALL APPLICANTS WILL RECEIVE CONSIDERATION FOR EMPLOYMENT WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, PREGNANCY, AGE, MARITAL STATUS, NATIONAL ORIGIN, PHYSICAL OR MENTAL HANDICAP. THE FOLLOWING INFORMATION IS REQUESTED IN ORDER TO HELP US MAKE THE BEST POSSIBLE PLACEMENT WITHIN THE COMPANY. ALL PORTIONS OF THIS APPLICATION PERTAINING TO YOU MUST BE COMPLETED. PLEASE DO NOT REFER TO INFORMATION ON YOUR RESUME.

WE APPRECIATE THE TIME YOU SPEND COMPLETING THIS APPLICATION.



POSITION APPLIED FOR: \_\_\_\_\_

SALARY RANGE: \_\_\_\_\_ DATE AVAILABLE TO START: \_\_\_\_\_

CLUB LOCATION REQUESTING TO WORK AT (CIRCLE ONE):

BURR RIDGE, IL      CINCINNATI, OH      DAYTON, OH      CRESTVIEW HILLS, KY

I AM AVAILABLE FOR (CIRCLE ALL THAT APPLY):

FULL TIME    DAYS    PART TIME    EVENINGS    TEMPORARY    WEEKENDS

NAME: \_\_\_\_\_ ARE YOU UNDER 18?: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

HIGHEST LEVEL OF EDUCATION COMPLETED (LIST SCHOOL): \_\_\_\_\_

HOW DID YOU HEAR ABOUT JOB? \_\_\_\_\_

**IT IS THE INTENT OF THE COMPANY TO KEEP ALL INFORMATION WE RECEIVE DURING ANY BACKGROUND INVESTIGATION PRIVATE AND CONFIDENTIAL. PLEASE READ AND SIGN THE STATEMENT BELOW ALLOWING THE COMPANY TO VERIFY PAST EMPLOYMENT INFORMATION GIVEN ON THIS APPLICATION.**

*"I hereby agree to have the President of the Company, his designee, or any agent of the Company, contact anyone necessary to investigate or verifying any information I have given on this application or to discuss my background, past performance, or my suitability for employment. I further agree to have my work background discussed by any person so contacted and waive all my rights to bring any action for defamation, invasion of privacy, or any similar cause of action, against anyone contacted as a result of what is said about me. I also understand that the information I supply will be checked and that any false statement or omission of fact or facts in connection with this Application for Employment will result in no offer of employment or dismissal from the Company if I am already employed."*

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

PLEASE ACCOUNT FOR ALL TIME IN THE LAST FIVE YEARS. INCLUDE PERIOD OF UNEMPLOYMENT AND ANY PRIOR EMPLOYMENT BY THIS COMPANY. BEGIN WITH YOUR MOST RECENT JOB- USE A SEPARATE SHEET OF PAPER IF NEEDED. DO NOT REFERENCE RESUME.

### Five Seasons Family Sports Club Application for Employment

EMPLOYER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_ SALARY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ DATES EMPLOYED: \_\_\_\_\_

MAY WE CONTACT THIS EMPLOYER?: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_ SALARY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ DATES EMPLOYED: \_\_\_\_\_

MAY WE CONTACT THIS EMPLOYER?: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_ SALARY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ DATES EMPLOYED: \_\_\_\_\_

MAY WE CONTACT THIS EMPLOYER?: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

I understand that all information provided in this application is true and complete, and that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

Initial here: \_\_\_\_\_

I authorize the investigation of any and all statements contained in this application. I also authorize whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be used in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

Initial here: \_\_\_\_\_

I understand that I may be required to successfully pass a drug screening and/or background as a condition of employment, if required.

Initial here: \_\_\_\_\_

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT, DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT, OR IMPLIED CONTRACT OF EMPLOYMENT, NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

**I HAVE READ, UNDERSTAND AND BY MY SIGNATURE CONSENT TO THESE STATEMENTS.**

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_