# THE FLORIDA CLUB Stuart, Florida

## EMPLOYMENT APPLICATION

(Please Print or Type the Entire Application)

### **EQUAL OPPORTUNITY EMPLOYER STATEMENT**

It is the policy and practice of The Florida Club to provide equal employment opportunities without regard to race, color, age, religion, sex, marital status, national origin, disability, veteran status, or disabled veteran. This policy relates to all phases of employment including, but not limited to, recruitment, placement, promotion, demotion, transfer, termination, rates of pay, or other forms of compensation, selection for training, conditions of employment, performance appraisals, discipline/counseling, and participation in The Florida Club employee activities.

#### DEDCOMAL DATA

	FERSON	IAL DATA			
Name Last First		Soc	ial Security	No	
Last First Other names known as	Middle/M	aiden			
Present AddressStreet	0:	County	<u> </u>	Zip	_Yrs at this address
Previous Address			State	Z1p	Yrs at this address
Street	City	County	State	Zip	
Home Telephone No. ()	* • •	Cell Pho	ne No. (	_)	
Type of position desired Desired Salary \$ Date Available to Work					
Can you perform the essential functions of the job you are applying for? Yes No					
How did you learn about this position? (C	ircle One)	Newspar	oer W	alk In	Referral
If referral, name of person:					
What type of work schedule do you prefer? Full Time Part Time					
What hours and days are you available to work?					
Have you ever applied to The Florida Club before? No Yes If yes, when?					
Have you ever worked for The Florida Club before? No Yes If yes, when?					
Have you ever been convicted of or pleaded guilty or no contest to, or had adjudication withheld in connection with a felony or misdemeanor, including driving while under the influence of alcohol or drugs? NoYes Are you currently on probation? NoYes If yes to either, describe in full (including dates).					
(NOTE: Convictions or guilty pleas of All circumstances will be considered.)		lications are no	t an automai	ic disqual	ification of employment.
Are you authorized to be employed in the upon verification of employment eligibility und					
Are you at least 18 years of age? No	Yeslf	less than 18	years of ag	e, state (	current age:

## **EMPLOYMENT RECORD**

List most recent employer first including military service. <u>Include periods of unemployment</u>. Please give accurate, complete employment record information. Insert additional sheets if necessary. DO NOT INDICATE "SEE RESUME".

EMPLOYER NAME:	EMPLOYED FROM (month/year):  EMPLOYED TO (month/year):			
ADDRESS:	JOB TITLES/DUTIES:			
CITY/STATE/ZIP:				
EMPLOYER PHONE NO.:	ANNUAL OR HOURLY SALARY: \$			
NAME OF SUPERVISOR:				
EMPLOYER NAME:	EMPLOYED FROM (month/year):			
ADDRESS:	EMPLOYED TO (month/year):  JOB TITLES/DUTIES:			
CITY/STATE/ZIP:				
EMPLOYER PHONE NO.:	ANNUAL OR HOURLY SALARY: \$ REASON FOR LEAVING:			
NAME OF SUPERVISOR:				
EMPLOYER NAME:	EMPLOYED FROM (month/year):			
ADDRESS:	EMPLOYED TO (month/year):  JOB TITLES/DUTIES:			
CITY/STATE/ZIP:				
EMPLOYER PHONE NO.:	ANNUAL OR HOURLY SALARY: \$ REASON FOR LEAVING:			
NAME OF SUPERVISOR:	TEAGORT ON ELAVATOR			
If currently employed, why are you seeking a change in If currently employed, may we contact your current emp				
Have you ever been terminated or asked to resign from If yes, please explain:	employment? No Yes			

## **EDUCATION/TRAINING/JOB SKILLS**

(Circle the highest grade completed)  1 2 3 4 5 6 7 8 9 10 11 12 (High School Graduate)  13 / 14 (Technical/Vocational School)  15 (College Freshman) 16 (College Sophomore)  17 (College Junior)  18 (Bachelor Degree)  19 (Master Degree)  20 (Ph.D.)					
If NOT a high school graduate, do you have an equivalency diploma? No Yes					
Are you currently attending school? No Yes If yes, name educational institution:					
Course of study:	Course of study: Anticipated graduation/completion date:				
TYPE OF SCHOOL	SCHOOL NAME	SCHOOL ADDRESS	COURSE OF STUDY	GRADUATED YES/NO	
HIGH SCHOOL					
COLLEGE/UNIVERSITY					
OTHER SCHOOL(S)					
List other training, special studies, and certificates you may have obtained:  List any professional, civic, and community organizations which you belong to that are relevant to the position you are applying:  List job skills you have acquired and equipment you can operate which pertains to the position you are applying. Include the length of experience.  What other qualifications, abilities and attributes do you have that will help you succeed in the position you are applying and at The Florida Club?					
If a requirement of the job for which you are applying:  Do you have a valid driver's license? Yes No  If yes, record the State & License No.  Has your driver's license ever been suspended or revoked? Yes No If yes, explain in full:					

## **REFERENCES**

<u>NAME</u>	COMPANY/POSITION	RELATIONSHIP TO YOU		PHONE		
				( )		
				( )		
ACKNOWLEDGEMENT						
I hereby certify that all statemer connection with the required em from further consideration for er	ployment investigations are nployment or, if employed, v	true, complete, and free of o will be cause for employment	missic separ	on and, if not, will disqualify me ation.		
I authorize The Florida Club to c employment application and/or r background search may include, data, credit report, licensing ver	esume and interview proces but will not be limited to, inq	s, and at any time during em	ploym	ent with The Florida Club. The		
By way of my signature, I authorize previous employers, government agencies, credit agencies, schools, and/or persons named in my application/resume to release any information regarding my employment, character, education background, criminal record, and other information pertinent to employment.						
I hereby release all companies, schools, government agencies, and persons from all liability for any damages for issuing this information. I further release, hold harmless, and indemnify The Florida Club from any liability resulting from inaccurate or incorrect data which may be received from any responding source of information.						
I understand that, as part of the application process, I may be required to submit to a test for the illegal use of drugs and/or alcohol, and during the scope of employment if within the guidelines of the Drug Free Workplace Program. In addition, I understand that refusal to test or failure to pass a required drug and/or alcohol test will disqualify me from further consideration for employment for a designated period of time or if currently employed will be cause for employment separation.						
I agree that, if I am employed, I will abide by all the written and implied policies, procedures, and practices of The Florida Club. I further understand that nobody at The Florida Club is authorized to enter into any written or verbal employment contract with me for any definite period of time without the express written consent of the General Manager of The Florida Club.						
I understand that I must be an U.S. Citizen or a properly authorized alien to qualify for employment and provide verification of that status.						
I understand that any employment with The Florida Club will not be for any fixed period of time and that, if employed, I may resign at any time for any reason and that the management of The Florida Club may terminate my employment at any time without notice for any reason. I further understand that any oral or written statements to the contrary may be considered invalid and should not be relied upon by me. Also, I acknowledge that this employment application and any other documents of The Florida Club are the property of The Florida Club and are not contracts of employment.						
I understand this application will be considered current for twelve (12) months and that a new application must be completed for further consideration of employment after that time.						
I acknowledge that I have read and understand the above statements.						
Signature of Applicant						