

RIDGEVIEW COUNTRY CLUB

700 West Redwing St

Duluth, MN 55803

Phone: 218-728-5128 - Fax: 218-728-3285

www.ridgeviewcountryclub.com

Employment Application

APPLICANT INFORMATION

Date: _____

Last Name: _____ First: _____ MI: _____

Street Address: _____ Apt/Unit #: _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ Cell: _____

Email Address: _____ Social Security #: _____ - _____ - _____

WORK AVAILABILITY

Position Applied For: _____ Previously Employed Here: Yes No

Days / Hours available to work:

No Preference _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____

When could you start? _____

Please list the reason that you are applying for employment at Ridgeview Country Club:

EDUCATION

High School: _____ Location: _____

From: _____ To: _____ Graduate/GED: Yes No

Higher Education: _____ Location: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

PREVIOUS EMPLOYMENT

Company: _____ Phone: () _____

Address: _____ Job Title: _____

Start Date: _____ End Date: _____ Reason for leaving: _____

Responsibilities and Duties: _____

Company: _____ Phone: () _____

Address: _____ Job Title: _____

Start Date: _____ End Date: _____ Reason for leaving: _____

Responsibilities and Duties: _____

List any previous experience in the Golf Industry:

- Golf: Pro Shop, Range, Bag Room _____
 - Maintenance: Mechanic, Grounds Crew _____
 - Hospitality: Server, Bartender, Kitchen, Beverage Cart _____
- _____

REFERENCES

Please list two references other than previous employers or relatives. Providing this information means that you give this organization permission to contact the references listed.

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Company: _____

Company: _____

Address: _____

Address: _____

Telephone: () _____

Telephone: () _____

APPLICANT'S ACKNOWLEDGEMENT

This application shall be considered active for no more than 45 days. After that time, applicants will be required to resubmit a completed application.

I certify that my answers are true and complete to the best of my knowledge. I authorize investigation into all statements I have made on this application as may be necessary for reaching an employment decision.

In the event I am employed, I understand that any false or misleading information I knowingly provided in my application or interview(s) may result in discharge and/or legal action. I understand also that if employed, I am required to abide by all rules and regulations of the employer and any special agreements reached between the employer and me.

Signature: _____ Date: _____