

BUTLER COUNTRY CLUB

Employment Application



APPLICANT INFORMATION

Last Name		First	M.I.	Date
Street Address			Apartment/Unit #	
City		State	ZIP	
Phone		E-mail Address		
Date Available	Social Security No.		Desired Salary	
Position Applied for				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	

EDUCATION

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date

Name: _____

**BUTLER COUNTRY CLUB
SCHEDULE PRE-EMPLOYMENT QUESTIONNAIRE**

1. Are there any days you cannot work for any reason – or time you cannot work.

SUNDAY: _____ Time you cannot work _____

MONDAY: _____ Time you cannot work _____

TUESDAY: _____ Time you cannot work _____

WEDNESDAY: _____ Time you cannot work _____

THURSDAY: _____ Time you cannot work _____

FRIDAY: _____ Time you cannot work _____

SATURDAY: _____ Time you cannot work _____

2. Are you a member of BCC, or a relative of any member? Yes ___ No ___

3. Do you have a relative working here? Yes ___ No ___

Butler Country Club

310 COUNTRY CLUB ROAD, P.O. BOX 348, BUTLER, PA 16003-0348
PHONE 724-586-7701 – FAX 724-586-5873
www.butlercc.org

AUTHORIZATION FOR BACKGROUND CHECK

(Please read and sign this form in the space provided below. Your written authorization is necessary for completion of the application process.)

I, _____, hereby authorize Butler Country Club to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Butler Country Club will utilize an outside firm or resources to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

Signature of Employee

Date

Employee's Name - Printed