

# Application for Employment

**Personal Information** Please PRINT and answer ALL questions on all sides of this application. If one does not apply, insert N/A.

**Date:** \_\_\_\_\_

Full Name (as it appears on your Social Security Card): \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 (Verification of Social Security Numbers completed upon offer of employment)

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Message Phone (\_\_\_\_\_) \_\_\_\_\_ Date of Birth if under age 18: \_\_\_\_\_

Do you have the legal right to work in the U.S.?  Yes  No Employment is subject to verification that applicant meets legal age and U.S. Work Permit requirements

Please list other name(s) under which you have previously been employed: \_\_\_\_\_

Have you, since the age of 18 or within the last 7 years (whichever is most recent), ever been convicted of a felony? (Conviction will not necessarily disqualify you from employment.)  Yes  No \* If yes, please describe briefly: \_\_\_\_\_

Have you ever been employed at Las Campanas before?  Yes  No \* If yes, please state dates and position held: \_\_\_\_\_

Referral Source:  Ad (name of publication) \_\_\_\_\_  Employee Referral (name of employee) \_\_\_\_\_  Other (walk-in, agency, Internet)

## Employment Interests

Position or type of employment desired: \_\_\_\_\_ Wage/Salary Desired: \_\_\_\_\_ Date Available: \_\_\_\_\_

Please fill in the hours you are available to work

Available for:

Full Time  Part Time  Seasonal  On-Call

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

**Do you understand and have the ability to perform the essential functions of the job with or without accommodation?**  Yes  No

*Any applicant with a disability who needs reasonable accommodation in any step of the hiring process to assist him/her to demonstrate his/her qualifications to perform the essential functions of the job for which the applicant is applying should inform Human Resources.*

## Education & Skills

Name	City	State	Major Subject	Degree/Diploma
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High School: \_\_\_\_\_

College: \_\_\_\_\_

College: \_\_\_\_\_

Graduate School: \_\_\_\_\_

Business, Trade or Other: \_\_\_\_\_

Professional Licenses and Affiliations: \_\_\_\_\_

Do you have any special training?  Typing \_\_\_\_\_ wpm  Software \_\_\_\_\_

Other \_\_\_\_\_

## Military Service

U.S. Military Service Duties: \_\_\_\_\_ Branch \_\_\_\_\_ Highest Rank Held \_\_\_\_\_ Reserve Status \_\_\_\_\_

Special Training: \_\_\_\_\_

**Employment History (beginning with your present or last position)**

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Wage/Salary: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone ( \_\_\_\_ ) \_\_\_\_\_  
Dates Employed: From (mo/yr) \_\_\_\_\_ To (mo/yr) \_\_\_\_\_ Position Held \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Duties: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Wage/Salary: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone ( \_\_\_\_ ) \_\_\_\_\_  
Dates Employed: From (mo/yr) \_\_\_\_\_ To (mo/yr) \_\_\_\_\_ Position Held \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Duties: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Wage/Salary: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone ( \_\_\_\_ ) \_\_\_\_\_  
Dates Employed: From (mo/yr) \_\_\_\_\_ To (mo/yr) \_\_\_\_\_ Position Held \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Duties: \_\_\_\_\_

**Professional References (list three professional references who are qualified to evaluate your professional capabilities: do no include relatives).**

Name: _____	Name: _____	Name: _____
Company: _____	Company: _____	Company: _____
Title: _____	Title: _____	Title: _____
Phone: ( ____ ) _____	Phone: ( ____ ) _____	Phone: ( ____ ) _____

**Signature**

The Club at Las Campanas, Inc. is committed to afford all qualified individuals equal opportunity to pursue employment and advancement opportunities. There shall be no discrimination against any person or group based upon race, color, creed, religion, national origin, sex, age, disability or veteran status. Please read the following statements carefully before signing this application. Only those applications that are signed and dated are considered valid.

I certify that all answers or statements I have made on this application or on my resume or other supplemental materials are true and correct without omissions. I acknowledge that any false statement or misrepresentation on this application or supplemental materials will be cause for refusal to hire or for immediate dismissal from employment at any time during the period of my employment. I authorize the Club to contact any of my employers to obtain information concerning my employment and/or education, except as otherwise indicated. I release the Club and all persons and organizations from all claims and liabilities of any nature arising from such investigations or the supplying of information for such investigations. I agree to conform to the rules and regulations established by the Club. I understand that an offer of employment is not an employment contract and that I or the Club may terminate my employment relationship at any time. I have read and understand the foregoing statements and accept the same as conditions of employment.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

## Consent to Drug Testing

The Club at Las Campanas, Inc. (the Club) is a drug free employer. As an applicant, I understand that my employment with the Club is contingent upon my successful completion of a drug test. In accordance with A.R.S. Section 23-493.04 (A), the Club has informed me of this testing requirement. I understand that a positive test will disqualify me at this time from further consideration for employment with the Club. I also understand that any attempt to adulterate or dilute a testing sample (for example, by excessive consumption of liquid or other substances designed to mask accurate test results) will constitute a refusal by me to participate in the testing process, precluding me from employment with the Club.

By my signature below, I agree and consent to provide a urine sample at a facility designated by the Club. I agree and consent to have the sample tested for the presence of unlawful drugs. I further authorize the release of the test results to the Club for its use in evaluating me for employment. I release the Club from any and all liability and claims incident to the sample taking, testing, and use of the test results.

I agree that if I begin work with the Club before the Club receives my test results; my employment is contingent on my successful completion of the testing process. Thereafter, my employment with the Club will be at-will, terminable with or without notice, with or without cause. I also understand that I may be subject to alcohol impairment testing and further drug testing during my employment, all as set forth in the Club's Drug and Alcohol Policy.

I understand that if I am refused employment based on my drug test results, I may reapply after 1 year and be considered for employment on the same basis as a new applicant.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Consent to Motor Vehicle Report (MVR) and/or Background Check

As an applicant, I understand that my employment with the Club is contingent upon receiving an acceptable MVR and/or Background Check as defined by the Companies insurance carrier standards. I understand that an unfavorable MVR and/or Background Check will disqualify me at this time from further consideration for employment with the Club.

By my signature below, I agree and consent to have my MVR and/or Background Check run on me by the Club. I further authorize the release of the results back to the Club for its use in evaluating me for employment. I release the Club for any and all liability and claims incident from the use of results.

I agree that if I begin work with the Club before the Club receives my results, my employment is contingent on receiving acceptable results. Therefore, my employment with the Club will be at-will, terminable with or without notice or cause. I also understand that I may be subject to having my MVR and/or Background Check run during the course of my employment at the will of the Club in accordance with Company policy.

I understand that if I am refused employment based on my MVR and/or Background Check results, I may reapply after 1 year and be considered for employment on the same basis as a new applicant.

Driver's License Number / State of Issue \_\_\_\_\_

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date