

# Job Application



1700 W. Renwick Rd.  
Romeoville, IL. 60446

Pro Shop: 815-254-3333  
Tavern: 815-254-7001

## Personal Information

Last		First		MI	Email				
Street Address		City	ST	Zip	Home Phone	Mobile Phone			
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 21 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, please explain:					
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No Branch				Were you referred? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list their name:					
What position are you applying for? <input type="checkbox"/> Golf <input type="checkbox"/> Tavern/Banquets				Do you have any physical limitations that would prevent you from performing any work for which you are being considered? Please explain:					
Expected Hourly Rate	Availability:		MON	TUES	WED	THURS	FRI	SAT	SUN
	AM PM								

## Prior Work Experience

	Current or Most Recent	Previous Employer	Previous Employer
Employer			
Address			
City, ST, ZIP			
Telephone			
Name of Immediate Supervisor			
Dates of Employment	From To	From To	From To
Position/Job Title			
Pay			
Reason for Leaving			
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Education

	Name/Location	Last Year Complete (circle)	Degree	Major Area of Study
High School		9 10 11 12		
College/University		1 2 3 4		
Trade School				
Other				
List any applicable special skills, training or proficiencies.				

## References

Name			
Relationship			
Telephone			
Years Acquainted			

## Emergency Contact Information

Name			Relationship:
Address			
City, ST, ZIP			
Telephone			

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.

Signature

Date