



Date Received: _____

Personal Information			
Last Name	First Name	Middle Name	Date
Street Address	City	State	Zip Code
Home Phone: (____) _____ - _____	Position Applying For: (circle all that apply) Attraction Attendant Management Maintenance Landscaper Security Admissions/Cashier		
Cell Phone: (____) _____ - _____			
Other: (____) _____ - _____			
Are you 18 or over? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Birthdate		Date Available to Work	
Have you been previously interviewed or employed by the Caddie Shack? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list date(s) and job title(s):			
Do you have your own transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, what is your means of transportation:			
Are you employed now?		If so, may we contact your present employer?	

Education			
Name and Location	# Years Completed	Major Area of Study	Degree/Diploma
High School			
College			
Graduate School			
Technical or Certificate Programs			

Employment History Please provide the following information for your previous three employers, beginning with the most recent:

Employer:	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Describe your qualifications for the type of employment you are seeking: (Please include skills, special training, etc.)

AT-WILL EMPLOYMENT

The relationship between you and the Caddie Shack is referred to as “employment at will”. This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the Caddie Shack. No representative of the Caddie Shack has the authority to enter into any agreement contrary to the foregoing “employment at will” relationship. You understand that your employment is “at will” and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and the owner.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause of dismissal. You are hereby authorized to make investigation of my personal references.

Signature of Applicant

Date