



Raspberry
Golf Management

EMPLOYMENT APPLICATION (rev 1.2020)

This employer complies with the American with Disabilities Act of 1990. We will not use information on this application to discriminate in employment opportunities or practices on the basis of race, color, disability, religion, gender, national origin, age, marital status, veteran's status, sex, genetic information or any other characteristic protected by applicable law.

GENERAL INFORMATION

Position Desired: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Home Address: _____ Apt/Bldg #: _____

City: _____ State: _____ Zip: _____

Home or Cell Phone: _____ Email Address: _____

Are you 18 years of age or older? Yes No Are you authorized to work in the United States? Yes No

EMPLOYMENT HISTORY

List the last three positions you have held, beginning with most recent. All information must be completed, even if you are submitting a resume.

Date: MM/YYYY	Employer Name and Address	Position	Supervisor & Title	Phone#
From:				
To:				
Reason for Leaving: _____				
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, explain: _____				
From:				
To:				
Reason for Leaving: _____				
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, explain: _____				
From:				
To:				
Reason for Leaving: _____				
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, explain: _____				

EDUCATION

	Name & Location	Course of Study	Degree Earned
High School:			
College:			
Technical School:			
Certifications:			
Other:			

PROFESSIONAL REFERENCES

Name	Relationship	Phone Number
1.		
2.		
3.		

CERTIFICATION AND AGREEMENT

I certify that the answers given herein are true and complete. I authorize investigation of statements contained herein as may be necessary. I understand that false statements, omissions, or misleading statements on this application shall be considered cause for dismissal. If my employment is terminated because of such omissions or misleading statements, I agree that my employers shall not be held liable in any respect.

Signature: _____ Date: _____

IF AN OFFER OF EMPLOYMENT HAS BEEN MADE TO YOU: In connection with your application and/or employment with the Company ("Employer") this notice is provided to inform you that a "consumer report" and/or "investigative consumer report", as defined by the Fair Credit Reporting Act, may be obtained from a consumer reporting agency for employment purposes. These types of reports may include information as to your character, general reputation, personal characteristics and mode of living, whichever are applicable. The report(s) may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, verification of your education or employment history and other background checks. They may involve interviews with sources such as your neighbors, friends or associates.

POST HIRE INFORMATION: Your Social Security Number is required in our electronic onboarding system in order to begin the employment paperwork (electronic) process. This information will be kept strictly confidential and is used only for payroll and tax purposes once you are an employee.

Social Security Number (SSN): _____