Employment Application

Barrington Hills Country Club

TELL US ABOUT YOURSELF													
Last Name						First Name						Middle Initial	
Have you ever worked or attended school under another we need to know to verify your records?				ther name th	at		YES NO	lf yes, Name					
Current Address					Email Addr			Address:					
City				County				State			Zip		
Telephone				How long a resident of this area?			a?						
Social Security #	iocial Security #			Do you have a legal right to remain				nain and	YES			NO	
(required if employed)			Γ	work permanently in the United States				d States?					
Are you at least 18 years of age? YI			YES	NO If hired you may be required to show legal proof of age.									
Have you ever worke	ed YES NO If yes, dates and reason for leaving:												
at BHCC before?	Under what name? Location/Department?												
EMPLOYMENT AVAILABILITY													
Position Desired					6	Date Available to Start							
Preferred Schedule	FULLTIME Desired			l Rate/Salary									
Please state any days or													
times you cannot work													
Do you now have or plan to have other employment while employed with BHCC? YES NO													
				EMPL	ΟΥΜ	IENT	HISTC	ORY					
Employer				Job Title									
Address					Duties								
Phone													
Dates To / From					Reason for Leaving								
Supervisor Name					May we contact?					YES	NO		
Employer	mployer				Job Title								
Address				Duties									
Phone													
Dates To / From				Reason for Leaving									
Supervisor Name				May	lay we contact?				YES	NO			

Barrington Hills Country Club is an Equal Opportunity Employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, veteran status, or other legally protected characteristics.

EMPLOYMENT HISTORY (CONTINUED)										
Employer				Job Title						
Address				Duties						
Phone										
Dates To / From	Dates To / From			Reason for Leaving						
Supervisor Name				May we contact?		YES NO				
TELL US ABOUT YOUR EDUCATION AND TRAINING										
		Name & Locat	ion of Scł	iool		raduated? Y / N	Degree (Type/Title) Received			
High School	gh School					Y / N				
University/College Undergraduate						Y / N				
University/College Graduate						Y / N				
Trade, Business or Correspondence School					Y / N					
Special Training o Certifications	or					Y / N				
REFERENCES										
Name	lame Relationship To Reference									
Title			Phone Number					Years Known		
Name			Relationship To Reference						_	
Title			Phone	Number		Years Known				
Name			Relatio	nship To Reference					-	
Title			Phone Number					Years Known		
PERSONAL INFORMATION										
Do you have a relative in our employ? YES 🗆 NO 📄 If yes, Name, Location/Department & Position:										
How were you referred to BHCC?										
Newspaper/Internet Ad : Agency (name) : (agency contact person) :										
Employee referral (name of employee) : Other (please specify) :										
Applicant Signature: Date of Signature: Application Must be signed Date of Signature:										

APPLICANTS WILL BE SUBJECT TO A CRIMINAL BACKGROUND CHECK AND WILL BE ASKED TO COMPLETE A CRIMINAL HISTORY SUPPLEMENT TO THIS APPLICATION BEFORE HIRING

(A criminal conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered. Applicants are not obligated to disclose expunged or sealed records of conviction or arrest)