



Middleburg Tennis Club

Application for Employment

APPLICANT INFORMATION											
Last Name			First			M.I.		Date			
Street Address					Apartment/Unit #						
City			State			ZIP					
Phone			E-mail Address								
Position Applied For			Date Available for Start								
Years of Related Work Experience			Which Category Would You Prefer?			Full Time <input type="checkbox"/>		Part Time <input type="checkbox"/>			
List Relevant Skills											
Are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If you are under the age of 16, do you have an employment certificate?			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Are you of legal age to pour alcohol (21)?			YES <input type="checkbox"/>		NO <input type="checkbox"/>					N/A <input type="checkbox"/>	
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		Are you able lift at least 30 pounds?			YES <input type="checkbox"/> NO <input type="checkbox"/>	
If yes, please explain											
EDUCATION											
High School			Address								
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
College			Address								
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
Other			Address								
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
REFERENCES											
<i>Please list three professional references.</i>											
Full Name			Relationship								
Company			Phone								
Address											
Full Name			Relationship								
Company			Phone								
Address											
Full Name			Relationship								
Company			Phone								
Address											

REVIIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	From	To	
Responsibilities			
Reason for Leaving			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	From	To	
Responsibilities			
Reason for Leaving			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	From	To	
Responsibilities			
Reason for Leaving			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date