



**APPLICATION  
FOR  
EMPLOYMENT**

(Please answer all questions)

W365 S4299 Hwy. 67  
Dousman, WI 53118  
(262) 965-6200  
[info@kettlemorainegolf.com](mailto:info@kettlemorainegolf.com)

We are an equal opportunity employer and fully subscribe to the principles of equal opportunity. It is our policy to seek and employ the best qualified personnel for all positions without regard to race, color, religion, age, sex, disability, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes. Information requested on this application will not be used for any purpose prohibited by law.

Date \_\_\_\_\_

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Street City State Zip

Are you 18 years or older? Yes or No \_\_\_\_ If not, state date of birth \_\_\_\_\_

Do you have transportation to and from work? Yes or No \_\_\_\_\_

Are you authorized to work in the U.S.A.? Yes or No \_\_\_\_\_

What position are you applying for? \_\_\_\_\_

On what date will you be available for work? \_\_\_\_\_

Can you work on weekends and holidays? Yes or No \_\_\_\_\_

Are there any dates you would need to take off work during the next 9 months? Yes or No \_\_\_\_\_

If you answered Yes to the previous question, list the dates \_\_\_\_\_

Hours applying for Full Time \_\_\_\_ Part Time \_\_\_\_ Days Only \_\_\_\_ Nights Only \_\_\_\_ Days/Nights \_\_\_\_

**EDUCATION**

<u>School Name and Address of School</u>	<u>Last Grade or Degree</u>	<u>Graduate?</u>
High School _____	_____	_____
College _____	_____	_____
Other _____	_____	_____
Military _____	_____	_____

**PAST WORK EXPERIENCE**

<u>Employment-</u> <u>(last company first)</u>	<u>Position</u>	<u>Supervisor</u>	<u>Wage</u>	<u>Employment</u> <u>Dates</u>	<u>Salary</u>	<u>Reason for</u> <u>Leaving</u>
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1. \_\_\_\_\_

Job Duties

\_\_\_\_\_

2. \_\_\_\_\_

Job Duties

\_\_\_\_\_

3. \_\_\_\_\_

Job Duties

\_\_\_\_\_

4. \_\_\_\_\_

Job Duties

\_\_\_\_\_

Are there any job duties you will be unable to perform? \_\_\_\_\_

Have you ever applied to this company before? Yes or No \_\_\_\_\_

Are you now employed? Yes or No \_\_\_\_\_ Telephone Number \_\_\_\_\_

**PLEASE READ AND SIGN BELOW**

The facts in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a contract signed by an officer.

\_\_\_\_\_  
By signing here I have read and understand the statement above. Date