Greensboro National Golf Club

330 Niblick Drive Summerfield, NC 27358 336-342-1113

Position Applied for:				
FULL LEGAL NAME				
Last	First		MI	
<u>ADDRESS</u>				
Street				
City	State		Zip Code	
		5 . (5:4)		
Social Security #		Date of Birth		
CONTACT INFORMATION		Date of Birth		
CONTACT INFORMATION TELEPHONE & EMAIL	Work	Date of Birth	Cell	
CONTACT INFORMATION TELEPHONE & EMAIL Home Are you eligible to work is Are you 16 years of age of Have you ever worked at	Work n the United States? older? a golf facility before?	Yes { } Yes { } Yes { }	Cell No { } No { } No { }	
CONTACT INFORMATION TELEPHONE & EMAIL Home Are you eligible to work is Are you 16 years of age of Have you ever worked at	Work n the United States? older? a golf facility before?	Yes { } Yes { }	No { } No { }	
CONTACT INFORMATION TELEPHONE & EMAIL Home Are you eligible to work is Are you ever worked at If yes, where and in what Have you ever applied for Have you ever been term If yes, please explain	Work In the United States? Idder? In a golf facility before? In capacity In a position at GNGC before?	Yes { } Yes { }	No { } No { }	

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AVAILAB	BILITY						
MON	TUE	WED	THU	FRI	SAT	SUN	
AVAILAB	SLE START DATE:						
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EXPECTE	D WAGE:						
<u>EXPERIEI</u>	NCF						
Job Title							
Employe							
Responsi							
Location							
Supervis	or/Title						
Contact	Phone #						
Reason F	or Leaving						
Salary:							
Dates:	Start		<u>E</u> nd				
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	or Leaving						
Salary:		-	— <u> </u>				
Dates:	Start		End				
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Job Title							
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Responsi Location							
Supervise							
Contact		-					
	For Leaving						
Salary:	or Leaving						
Dates:	Start		— End				
	Start		End End				
	J. G. T.						

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Name of Institution Degree Received Major Do It certify that answers given herein are true and complete to the best of my knowledge. It authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. It hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide	Name of Institution Degree Received Major Down	Name of Institution Degree Received Major Down	DUCATION	336-342-11	113	
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