



# Greensboro National Golf Club

## Job Application

proshop@greensboronational.com | 336-342-1113

330 Niblick Drive, Summerfield, NC

Date: \_\_\_/\_\_\_/\_\_\_

Position Applying For: \_\_\_\_\_

Applicants Full Legal Name:

\_\_\_\_\_

Home Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_

Preferred Phone Number: \_\_\_\_\_

Preferred Email Address: \_\_\_\_\_

Are you eligible to work in the United States? Yes [ ] No [ ]

Have you worked at a golf facility before? Yes [ ] No [ ]

If yes, where and what position?

\_\_\_\_\_

Have you applied for a job at GNGC before? Yes [ ] No [ ]

Have you ever been terminated from a job? Yes [ ] No [ ]

Have you ever been convicted of a criminal act? Yes [ ] No [ ]

If yes, please state the date and explain.

\_\_\_\_\_

**Availability:**

If you have no restrictions, leave the box blank.

If you are unavailable for a certain day, write No Availability.

If there are partial restrictions, please write out times with am/pm clarification.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Available Start Date: \_\_\_/\_\_\_/\_\_\_\_\_

**Experience:**

Job Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Location: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Date (Month, Year-Month, Year): \_\_\_\_\_ - \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Location: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Date (Month, Year-Month, Year): \_\_\_\_\_ - \_\_\_\_\_

**Education:**

Name of Institution: \_\_\_\_\_

Degree Received: \_\_\_\_\_

Major: \_\_\_\_\_

Date (Month, Year-Month, Year): \_\_\_\_\_ - \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Degree Received: \_\_\_\_\_

Major: \_\_\_\_\_

Date (Month, Year-Month, Year): \_\_\_\_\_ - \_\_\_\_\_

-I certify that the answers given herein are truthful and are completed to the best of my knowledge.

-I authorize consent to investigation of all statements contained in this application as it may be necessary when arriving at an employment decision for the employer.

-I 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 the 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 a 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 by all rules and regulations of the employer.

**-Probationary Period:** A 90-day probationary period will be in effect once the employee has started employment. The objective of this period is to guarantee the employee is trained and can be assessed properly before employment longer than 90 days is guaranteed. During this period, the employee will go through all necessary training needed to complete the necessary tasks provided by the employer. At any point during this 90-day period, both the employee and employer have the right to terminate the employment contract at any time without notice or cause.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_