

Application for Employment

NC State University Club is an equal opportunity employer and does not unlawfully discriminate in employment. No question on the application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law. Equal access to employment, services, and programs is available to all persons.

Applicant name: _____ Date: _____

Position(s) applied for: _____

Address; (street, city, state, zip code): _____

Telephone # _____ Cell Phone # _____

Email Address: _____

Type of employment desired: Full – time Date you can start work: _____

Part – Time

Seasonal

Are you able to meet the attendance requirements? _____ Yes _____ No

Do you have any objection to working overtime if necessary? _____ Yes _____ No

Have you ever been previously employed by our organization? _____ Yes _____ No

Can you submit proof of legal employment authorization and identity? _____ Yes _____ No

If you are under 18, can you furnish a work permit if it is requested? _____ Yes _____ No

Have you ever served in the Armed Forces? _____ Yes _____ No

Driver's license Number (if driving or operating equipment is an essential job duty) State _____ # _____

How were you referred to us?

_____ Club Member _____ Newspaper _____ Internet Ad _____ Staff Member _____ Walk-In _____ Clubs Website

Employment History

Please provide all employment information for your last three employers starting with the most recent or current

Employer: _____ Position Held: _____

Address: _____ Telephone # _____

Immediate supervisor name and title: _____

Dates Employed: From _____ to _____ Salary: _____

Job Summary: _____

Reason for leaving: _____

Employer: _____ Position Held: _____

Address: _____ Telephone # _____

Immediate supervisor name and title: _____

Dates Employed: From _____ to _____ Salary: _____

Job Summary: _____

Reason for leaving: _____

Employer: _____ Position Held: _____

Address: _____ Telephone # _____

Immediate supervisor name and title: _____

Dates Employed: From _____ to _____ Salary: _____

Job Summary: _____

Reason for leaving: _____

Other Skills & Qualifications

Summarize any job – related training, skills, licenses, certifications and/or other qualifications:

Education History

List the school name and location, years completed, and any degrees earned:

High School: _____

College: _____

Technical Training: _____

Other: _____

References

List three references, including names, telephone numbers and years known (do not include relatives or employers)

1. Name: _____ Telephone # _____ Years Known: _____
2. Name: _____ Telephone # _____ Years Known: _____
3. Name: _____ Telephone # _____ Years Known: _____

I hereby authorize the NC State University Club to contact, obtain and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the NC State University Club and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I hereby authorize the NC State University Club to conduct testing such as but not limited to; background, credit and drug as a condition of employment and at any time during my employment.

I understand that it is the policy of NC State University Club not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the Americans with Disabilities Act (ADA)

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicants Signature: _____ Date: _____