

# THE BEDENS BROOK CLUB

240 Rolling Hill Road, Skillman, NJ 08558



## APPLICATION FOR EMPLOYMENT

TODAY'S DATE \_\_\_/\_\_\_/\_\_\_

*PRINT LEGIBLY IN INK*

### PERSONAL DATA

NAME (Last): \_\_\_\_\_  
(First): \_\_\_\_\_ (Middle Initial) \_\_\_\_\_

### CONTACT INFORMATION

STREET: \_\_\_\_\_ APT# \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PH[Home]: ( ) \_\_\_\_\_ - \_\_\_\_\_ PH[Cell]: ( ) \_\_\_\_\_ - \_\_\_\_\_  
E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_ • How many yrs have you lived here? \_\_\_\_\_

*if you lived at the above address less than 5 years, please list your address prior to the above*

STREET: \_\_\_\_\_ APT# \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

### EMPLOYMENT INTERESTS

POSITION APPLIED FOR? \_\_\_\_\_

HOW DID YOU LEARN OF THIS POSITON? \_\_\_\_\_

HAVE YOU WORKED HERE IN THE PAST? \_\_\_\_\_ IF YES, WHEN? \_\_\_\_\_

IF HIRED ...(check all that apply)

- 1) Are you willing to work: \_\_\_ Full Time \_\_\_ Part Time \_\_\_ Evenings \_\_\_ Weekends \_\_\_ Holidays
- 2) Do you have reliable means of transportation to get to work? \_\_\_\_\_
- 3) Are you legally authorized to work in the United States? \_\_\_ YES \_\_\_ NO
- 4) What date will you be available to start work? \_\_\_/\_\_\_/\_\_\_
- 5) If you desire only seasonal work, what is the last date you can work? \_\_\_/\_\_\_/\_\_\_

### **FOR OFFICE USE ONLY:** Completed by interviewer **AFTER** successful selection (to continue process)

*PRINT LEGIBLY IN INK*

Position/Title: \_\_\_\_\_ Dept: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Status: \_\_\_ FT \_\_\_ PT **and** Months: \_\_\_ [12] \_\_\_ [less than 12] Est. Start Date: \_\_\_/\_\_\_/\_\_\_

Pay Rate: \$ \_\_\_\_\_ /HR. Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**HR ONLY:** Tabb Final Rpt Date \_\_\_/\_\_\_/\_\_\_ Formal Offer Date \_\_\_/\_\_\_/\_\_\_ **ACTUAL** Start Date: \_\_\_/\_\_\_/\_\_\_

**WORK HISTORY**

**CURRENT / MOST RECENT**

EMPLOYER NAME: \_\_\_\_\_

POSITION / TITLE: \_\_\_\_\_

**CONTACT INFORMATION**

STREET: \_\_\_\_\_ SUITE / FLOOR# \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**SUPERVISOR / CONTACT INFORMATION**

SUPERVISOR'S NAME: \_\_\_\_\_

PHONE: (        ) \_\_\_\_\_ - \_\_\_\_\_ EXT: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

**MAY WE CONTACT THIS PERSON?**

**YES**

**NO**

**EMPLOYMENT DETAILS**

START DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

STATUS: \_\_\_\_ FT \_\_\_\_ PT

END DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ or CURRENTLY EMPLOYED? \_\_\_\_ RATE OF PAY \$ \_\_\_\_\_

REASON FOR LEAVING? \_\_\_\_\_

DESCRIBE THE WORK YOU DID / DUTIES: \_\_\_\_\_

**WORK HISTORY**

**PRIOR**

EMPLOYER NAME: \_\_\_\_\_

POSITION / TITLE: \_\_\_\_\_

**CONTACT INFORMATION**

STREET: \_\_\_\_\_ SUITE / FLOOR# \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**SUPERVISOR / CONTACT INFORMATION**

SUPERVISOR'S NAME: \_\_\_\_\_

PHONE: (        ) \_\_\_\_\_ - \_\_\_\_\_ EXT: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

**EMPLOYMENT DETAILS**

START DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ RATE OF PAY \$ \_\_\_\_\_ STATUS: \_\_\_\_ FT \_\_\_\_ PT

END DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ RATE OF PAY \$ \_\_\_\_\_

REASON FOR LEAVING? \_\_\_\_\_

DESCRIBE THE WORK YOU DID / DUTIES: \_\_\_\_\_

**EDUCATION**

**HIGH SCHOOL**

SCHOOL NAME: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ DID YOU GRADUATE: \_\_\_\_\_

**COLLEGE / UNIVERSITY / TECHNICAL SCHOOL**

HIGHEST DEGREE ATTAINED: \_\_\_\_TECH CERT. \_\_\_\_ASSOCIATES \_\_\_\_BA/BS etc. \_\_\_\_MA/MS etc.

AREA / FIELD OF STUDY: \_\_\_\_\_

GPA [Overall]: \_\_\_\_\_ GPA [Major]: \_\_\_\_\_ TOTAL CREDITS:: \_\_\_\_\_

**CONTACT INFORMATION**

SCHOOL NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ EXT: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

**PLEASE PROVIDE THREE (3) REFERENCES THAT ARE NOT PAST EMPLOYERS OR RELATIVES.**

**REFERENCES**

**#1**

NAME: \_\_\_\_\_ #YEARS KNOWN? \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ EXT: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_ RELATIONSHIP? \_\_\_\_\_

**#2**

NAME: \_\_\_\_\_ #YEARS KNOWN? \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ EXT: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_ RELATIONSHIP? \_\_\_\_\_

**#3**

NAME: \_\_\_\_\_ #YEARS KNOWN? \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ EXT: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_ RELATIONSHIP? \_\_\_\_\_

**PLEASE READ**

Job applicants are considered for all positions without regard to race, creed, color, national origin, sex, affectional or sexual orientation, age, religion, marital, or veterans status, or disability.

The American with Disabilities Act of 1990 as amended prohibits employers from discriminating against any qualified person on the basis of a disability. The Club makes reasonable accommodations during all aspects of the employment process, such as testing and interviews. The Club also makes reasonable accommodations in the work environment to enable a person with a disability to perform the essential job functions and to participate equally with co-workers without disabilities. However, the Club can only make reasonable accommodations when it is aware of a disability. **It is up to you to inform the prospective employer if you need a reasonable accommodation.** The Club may ask you for documentation to support your request for a reasonable accommodation. If you need a reasonable accommodation before the interview process begins, please inform the contact person to which you are applying.

*The Bedens Brook Club is an Equal Opportunity Employer*

Please be advised: After the initial interview and subsequent successful selection, a background check will be performed requiring additional forms to be promptly completed as part of our hiring process.

Please provide a phone number where and what time you may be contacted for an interview:

**PHONE:** (        ) \_\_\_\_\_ - \_\_\_\_\_    **TIME:**    \_\_\_Morning    \_\_\_Afternoon    \_\_\_Evening

I **CERTIFY** that the information on this application is complete and accurate to the best of my knowledge. I understand that any misleading or incorrect information may render this application void and be just cause for immediate termination if employed.

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

*Thank you for completing this application form and  
for your interest in employment with us.*