



HEADWATERS GOLF CLUB

20018 County Rd 1
Park Rapids, MN 56470

(218)732-4832

www.headwatersgolf.com

Employment Application

Contact Information

Full Name: _____ Date: _____

First

Last

Phone Number: _____ Alternate Number: _____

E-mail: _____

Address: _____

Street Address

City

State/Zip Code

Position

Position Applying For: _____

Referred to Position by: _____

Education

What is the highest level of education you have received? **Please Choose One**

(Ex. Some High School, High School Diploma, Some College, AA Degree, Bachelors or Higher)

Where was this completed at? _____

General Information

Are you less than 18 years of age? Yes _____ No _____

If yes, please state age: _____

Are you legally eligible for employment in the U.S.? Yes _____ No _____

Have you ever been convicted of a crime? Yes _____ No _____

If yes, list the convictions that are a matter of public record: _____

Availability

Employment Interested in: Full Time _____ Part time _____

Available Start Date: _____ End Date: _____

(Note: Headwaters Golf Club is open March 1st- October 30th)

If applicable, are you available to work overtime? Yes _____ No _____

Please fill out the attached calendar with any other dates throughout the summer that will be unavailable for scheduling.

Emergency Contact Information

Name: _____ Relation: _____

Phone Number: _____



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Previous Employment

Company: _____ Position: _____
Start: _____ End: _____
Supervisor: _____ Phone: _____
Reason for Leaving: _____

Company: _____ Position: _____
Start: _____ End: _____
Supervisor: _____ Phone: _____
Reason for Leaving: _____

Company: _____ Position: _____
Start: _____ End: _____
Supervisor: _____ Phone: _____
Reason for Leaving: _____

Certification

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information could lead to the rejection of my application.

By signing this document I understand that this is not a contract of employment. This is an at-will employment opportunity and I recognize that employment opportunity can be terminated at any time without cause by myself or Headwaters Golf Club. With appropriate notice, I will have full discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have that right as well.

I recognize that during my shifts I need to conduct myself in a responsible manner, be customer friendly, and conduct the desired responsibilities of the position. I will show up for my scheduled shifts prepared to complete my required tasks and assist customers and members. I recognize that failure to complete this consistently can lead to termination of the employment. I understand that Headwaters Golf Club offers seasonal employment running from March first through October thirty-first. Headwaters Golf Club is not responsible for employment before or after the stated season. Previous employees are offered the opportunity to reapply for the following season, but are not guaranteed employment.

I authorize the managers at Headwaters Golf Club to contact my former employers and educational organizations regarding my employment and education if deemed necessary.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

Applicant Signature: _____ Date: _____