

THE CLUB AT GATEWAY

Employment Application

All offers of employment are contingent on passing a pre-employment screening for the unlawful use of controlled substances, including drugs and alcohol, plus a background check, including social security verification and workers' compensation.

Applicant Note: This employment application is intended for use in evaluating your qualifications for employment. It is not an employment contract. Please answer all questions completely and to the best of your ability. False or misleading statements are grounds for refusal or termination of employment and benefits. The Club at Gateway in an Equal Opportunity Employer to ensure that there shall be no discrimination against any employee or applicant for employment on the basis of age, race, color, marital status, religion, sex, national origin, disability or veteran status or any other status protected by law.

APPLICANT INFORMATION							
Last Name			First			M.I.	Date
Street Address						Apartment/Unit #	
City			State			ZIP	
Phone			E-mail Address				
Date Available			Desi			ired Salary	
Position Applied for							
Type of Employment desired:	F/T	Р/Т 🗌	Temporary		Sea	isonal 🗌	
Have you ever worked for this company?	YES 🗌	NO 🗌	If so, when?				
Are you authorized to work in the U.S.? YES NO							
If offered employment, can you provide proof that you are 18 years of age or older? YES \square NO \square							
Can you work different shifts? YES 🗌 NO 🗌 Weekends / Holidays? ? YES 🗌 NO 🗌							

Nill you work overtime if asked? YES 🛛 NO 🗆	Is a reliable means of transportation available to you? YE	ES □	NO 🗆
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Are you fluent in other languages besides English? YES $\hfill\square$ NO $\hfill\square$

EDUCATION						
High School			Address			
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree	
College			Address			
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree	
Other			Address			
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree	

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May we contact your previous supervisor for a reference? YES NO

MILITARY SERVICE					
Branch	From To				
Rank at Discharge	Type of Discharge				
If other than honorable, explain					

DISCLAIMER AND SIGNATURE

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of The Club at Gateway, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/General Manager of the Company. Both the undersigned and The Club at Gateway may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I understand that The Club at Gateway maintains a full and or modified drug free workplace and that I may be required to submit to a drug/alcohol test, undergo a post job offer medical examination, or pencil and paper tests designed to determine my suitability for the position for which I am being considered. Additionally, from time to time, I may be required to take subsequent tests during the course of my employment and consent to such post job offer and post hire testing. I understand that, subject to applicable law, that The Club at Gateway shall be the sole judge of the acceptability of any test results.

I promise that all the information I have supplied on this application, and any other information, oral or written is true and accurate. I understand that any misstated, misleading, incomplete or false information is grounds for rejection of this application, refusal to hire, a withdrawal of an offer of employment, or immediate discharge without recourse, whenever and however discovered.

I hereby authorize The Club at Gateway, its agents or assigns, to verify any information provided in this application and I authorize my past employers, schools or any other persons to answer all questions concerning my ability, character, reputation, and previous employment record. I agree to hold The Club at Gateway and any such previous employer harmless for disclosure and authorize them to release any and all factual information pertaining to me and my employment.

I fully understand and acknowledge the following:

- That my employment is at will;
- That I may be discharged for any reason without notice;
- That I am subject to a 90 day introductory period;
- That The Club at Gateway, where applicable, may conduct a criminal background, driver's license, credit investigation and/or may check my references;
- That work schedules may vary and can be unpredictable, and that as such I may be required to work a different shift, weekends or overtime;
- That I will be required to comply with the policies and procedures set forth in the employee handbook of my employer.

I HAVE READ AND FULLY UNDERSTAND ALL STATEMENTS AND CONDITIONS SET FORTH ON THIS APPLICATION.

Applicant's Signature

Date of Application

Applicant's Printed Name

This Organization Participates in E-Verify



This SWA will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each applicant's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this SWA is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

NOTICE:

Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.

SWA and employers may not use E-Verify to reverify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

If you believe that your SWA has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or citizenship status, please call the Office of Special Counsel for Immigration Related Unfair Employment Practices at 1-800-255-7688 (TDD: 1-800-237-2515).

Employment Verification.

E Verify Done.

For more information on E-Verify, please contact DHS at: **1-888-464-4218**



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