



Hamilton Club of Lancaster
106 EAST ORANGE ST., LANCASTER, PENNSYLVANIA 17602
TELEPHONE (717) 397-6296

APPLICATION FOR EMPLOYMENT

GENERAL INFORMATION

Required for employment files

DATE: _____

_____	_____	_____	
Last Name	First	Middle	
_____	_____	_____	_____
Address	City	State	Zip Code
_____	_____	_____	_____
Telephone	Age if under 18	City and State (or Country) of Birth	

If a current employee referred you please give their name: _____

Have you ever been employed by the Hamilton Club before? _____

For what position are you applying? _____

Do you desire: Full-time work _____ Part-time work _____

Will you work over-time if asked to do so? Yes _____ No _____

Please state the names of relatives and friends working for the Hamilton Club.

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?

Yes No If yes, explain _____

- **Proof of citizenship or immigration status will be required upon employment.**
- **All applicants must pass Drug Panel Testing before hired.**
- ***All applicants will be screened for criminal and sex offences before hired.**

***Email** (*required for screening process*): _____

EMPLOYMENT HISTORY

1) Last employed _____ From _____ To _____

Address _____

City _____ State _____ Zip _____

Salary to start _____ Leaving _____

Supervisor's Name _____ Telephone # _____

May we contact this employer: YES _____ NO _____

2) Last employed _____ From _____ To _____

Address _____

City _____ State _____ Zip _____

Salary to start _____ Leaving _____

Supervisor's Name _____ Telephone # _____

May we contact this employer: YES _____ NO _____

OTHER QUALIFICATIONS:

Please summarize special job-related skills and qualifications acquired from previous employment or other experience.

EDUCATION

High School _____

College _____

Business _____

Other _____

Highest level of education completed: _____

REFERENCES

Please list three personal or business references:

Name _____ Telephone _____

Address _____

City _____ State _____ Zip _____

Name _____ Telephone _____

Address _____

City _____ State _____ Zip _____

Name _____ Telephone _____

Address _____

City _____ State _____ Zip _____

EMPLOYMENT CLAUSE:

I certify that all answers given herein are true and complete. I authorize any investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby understand and acknowledge that 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 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 an authorized officer of this organization specifically acknowledges such change in writing.

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.

*Signature _____ Date _____

*Required for Employment Files