



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.**

\* Your email is 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