

# AH Alpine Hills Club

4139 Alpine Road  
 Portola Valley, CA 94028-8042  
 Phone: 650-851-1591 Fax: 650-851-1759  
 www.alpinehills.us

## Employment Application

(Please Print Clearly)

Last Name:		First Name:		Middle:
Address:				
Phone:		Email:		Social Security #:
If hired, can you provide evidence of legal eligibility to work in the U.S.?			Any offer of employment is conditioned upon completion form I-9 and providing the appropriate documents for identity and work authorization.	
Have you ever been convicted of a criminal offense (felony or misdemeanor)? (Convictions of marijuana-related offenses that are more than two years old need not be listed)				
If yes, state the nature of the crime(s), when and where convicted and the disposition of the case: (Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)				
Are you at least 18 years old? (If under 18, hire is subject to verification of minimum legal working age)				

Position Desired:	
Regular full-time work	
Regular part-time, work availability: <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F <input type="checkbox"/> S <input type="checkbox"/> Su	
Temporary work, e.g., seasonal and/or holiday work (dates available: _____ )	
If hired, on what date can you start?	
Pay rate desired:	
Have you previously applied to or worked for Alpine Hills?	If yes, when?

### Education, Training and Experience:

School	Name & Address	# of years completed	Did you Graduate	Degree/Certificate
High School				
College/University				
Vocational/Business				
Special Skills:				

**Employment History:** List present and past employment beginning with most recent (last 10 years is sufficient). Account for periods of unemployment. Complete this section even if attaching a resume.

Employer Name:	
Type of Business:	Phone:
Supervisor Name:	Your Position & Duties:
Date of Employment: From _____ To _____	
Weekly Pay: Start _____ End _____	
Reason for Leaving:	

Employer Name:	
Type of Business:	Phone:
Supervisor Name:	Your Position & Duties:
Date of Employment: From _____ To _____	
Weekly Pay: Start _____ End _____	
Reason for Leaving:	

Employer Name:	
Type of Business:	Phone:
Supervisor Name:	Your Position & Duties:
Date of Employment: From _____ To _____	
Weekly Pay: Start _____ End _____	
Reason for Leaving:	

*Note: Attach additional pages if necessary*

**References:**

List below three persons not related to you, who have knowledge of your work performance within the last three years.

Name:	
Phone:	Email:
Occupation:	# of Years Acquainted:

Name:	
Phone:	Email:
Occupation:	# of Years Acquainted:

Name:	
Phone:	Email:
Occupation:	# of Years Acquainted:

**Please read and initial each paragraph, and sign below:**

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact(s) on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate termination if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure(s). In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation of disclosure(s).

\_\_\_\_\_ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period of time and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

\_\_\_\_\_ I understand that no manager or representative of the organization, other than the General Manager of the organization, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

\_\_\_\_\_ I also agree to conform to the Club's policies and acknowledge that these policies may be changed by the Club, with or without notice.

\_\_\_\_\_ I understand that, as this organization deems necessary, if employed, I may be required to work overtime hours or hour outside a normally defined work day or work week. The work week is Sunday through Saturday. I understand that I am required to work a minimum of two to three summer holidays (Memorial Day, 4<sup>th</sup> of July and Labor Day).

\_\_\_\_\_ I am in agreement with the Club's policy of hiring and promoting on the basis of individual ability without regard to race, religion, color, sex, national origin, age handicap or veteran status.

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Applicant Signature

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Date