

SONGBIRD HILLS GOLF CLUB
W259 N8700 HWY 164, Hartland, WI 53029
(262) 246-7050
www.GolfSongbird.com

JOB APPLICATION FORM

Name: _____ (Please Print)
Address: _____ Social Security #: ____ - ____ - ____

ZIP: _____ Date of Birth (If under 21 years of age):
Month ____ Date ____ Year ____
Phone (Cell): _____ Valid Driver's License: ____ YES ____ NO
E-Mail: _____
Emergency Contact: _____
Emergency Contact Phone #: _____
Relationship: _____

JOB DESIRED: _____ FULL-TIME (35 + Hours/Week)
_____ PART-TIME (15-30 Hours/Week)

Date available to begin: _____
Any days or times you CANNOT work: _____

WORK EXPERIENCE (Past Employment):

Last Employer (Company Name): _____ Supervisor: _____ Phone: _____ Address: _____ _____ Employment Dates: FROM ____ TO ____ Job Title: _____ Reason for leaving: _____	Prior Employer (Company Name): _____ Supervisor: _____ Phone: _____ Address: _____ _____ Employment Dates: FROM ____ TO ____ Job Title: _____ Reason for leaving: _____
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EDUCATION:

Most recent school attended: _____
Current Grade/Year: _____ Major or area of emphasis: _____
Last math course completed: _____ Grade (A, B, C, D)

WHY ARE YOU INTERESTED IN WORKING AT SONGBIRD HILLS GOLF CLUB ?

SIGNATURE: _____ **DATE:** _____