



COPPER CREEK

EMPLOYMENT APPLICATION

Instructions:

Please complete all sections as thoroughly as possible, even if you are attaching a resume. It is necessary to provide complete information as this will be used to determine eligibility. The personal information requested on this form is considered confidential information and is used for the purpose of this employment application.

Please submit the completed application to the Department's Manager or leave at the Pro Shop to the attention of Mike Ruffolo, Head Professional.

POSITION INFORMATION

POSITION APPLIED FOR:

Golf Turf
 Banq/Rest Kitchen
 Accounting Facility/Maint

AVAILABILITY-check all that apply

DAY SHIFT WEEKEND
 Holidays

FLEXIBILITY

ARE YOU WILLING TO WORK EVENING
 SHIFTS: YES NO

AVAILABILITY START DATE

START DATE: MM / DD /YY
 NO. OF DAYS/ HOURS PER WEEK

FOR GENERAL APPLICATION

Indicate (✓) the type of employment you are requesting

PERMANENT
 SEASONAL

Full Time Part Time

TYPE(S) OF POSITION – please describe

PERSONAL INFORMATION

LAST NAME FIRST NAME INITIALS

Is your age at least 16 years and less than 65 years?
 YES NO

RESIDENCE TELEPHONE NO. ()
 OTHER TELEPHONE NO. ()

MAILING ADDRESS

CITY

PROVINCE

POSTAL CODE

EMAIL

LEGAL STATUS TO WORK IN CANADA – Valid documentation is required upon employment

CANADIAN CITIZEN LANDED IMMIGRANT - PERMANENT RESIDENT
 WORK PERMIT OTHER – please specify:

CURRENT EMPLOYMENT STATUS

PHYSICAL REQUIREMENTS:

WHILE PERFORMING THE DUTIES OF SOME JOBS, THE EMPLOYEE IS REGULARLY REQUIRED TO STAND; WALK; BEND; MOVE AND LIFT UP TO 50 POUNDS.

IF YES, PLEASE SPECIFY WHAT RESTRICTIONS YOU HAVE TO PERFORM YOUR JOB :

ARE YOU AWARE OF ANY REASON WHY YOU CANNOT PERFORM THE DUTIES OF THE JOB YOU HAVE APPLIED FOR DUE TO THE ABOVE REQUIREMENTS
 YES NO

ARE YOU CURRENTLY EMPLOYED YES NO. ARE YOU CURRENTLY A FULL TIME OR PART TIME STUDENT YES NO.

HAVE YOU RECEIVED SAFETY TRAINING IN PREVIOUS JOBS YES NO. HAVE YOU RECEIVED WHMIS TRAINING OR OSHA TRAINING YES NO. Indicate When:

EDUCATION & TRAINING

Please describe post secondary courses and training which have given you work related knowledge and skills. Start with highest level achieved and specify the degrees, certificates or diplomas completed. Official documentation may be required. Attach a separate page if necessary.

NAME OF INSTITUTION OR ORGANIZATION	LOCATION	YEAR TAKEN	AREA OF STUDY / COURSE	GRADE / CERTIFICATION / DIPLOMA / DEGREE	COMPLETED YES NO (✓)
					<input type="checkbox"/> <input type="checkbox"/>
					<input type="checkbox"/> <input type="checkbox"/>
					<input type="checkbox"/> <input type="checkbox"/>

ASSOCIATION / PROFESSIONAL AFFILIATIONS OR OTHER CERTIFICATION:

List any active memberships or registrations in a professional or career related organization or society. (CPGA; CCC; CHC; SMART SERVE ; OTHER ;)

WORK HISTORY

Have you previously been employed at Copper Creek Golf Club ? NO YES, indicate the department and dates:

Why did you leave employment at Copper Creek ?

Beginning with your most RECENT experience, describe your work history. You may wish to include relevant volunteer positions. In the area for "Duties and Skills" describe the *major* duties and skills acquired/used as they relate to the position you are applying for. If any references have known you by a previous name, please specify. Attach additional pages if required.

EMPLOYER AND LOCATION		FROM YYYY / MM / DD	TO YYYY / MM / DD
SUPERVISOR – REFERENCE	SUPERVISOR'S TELEPHONE NO. ()	REASON FOR LEAVING	
POSITION HELD BY APPLICANT	JOB CLASSIFICATION – If applicable	RATE PER HOUR (or Salary)	NO. OF PEOPLE SUPERVISED – If applicable
DUTIES AND SKILLS			

EMPLOYER AND LOCATION		FROM YYYY / MM / DD	TO YYYY / MM / DD
SUPERVISOR – REFERENCE	SUPERVISOR'S TELEPHONE NO. ()	REASON FOR LEAVING	
POSITION HELD BY APPLICANT	JOB CLASSIFICATION – If applicable	SALARY	NO. OF PEOPLE SUPERVISED – If applicable
DUTIES AND SKILLS			

EMPLOYER AND LOCATION		FROM YYYY / MM / DD	TO YYYY / MM / DD
SUPERVISOR – REFERENCE	SUPERVISOR'S TELEPHONE NO. ()	REASON FOR LEAVING	
POSITION HELD BY APPLICANT	JOB CLASSIFICATION – If applicable	SALARY	NO. OF PEOPLE SUPERVISED – If applicable
DUTIES AND SKILLS			

SKILLS / EXPERIENCE

Check (✓) areas of skills/experience that you have which relate to the applied position or, if this is a general application, to the position(s) that interests you, and attach any appropriate documentation.

	SPECIFY	NO. OF YEARS/MONTHS EXPERIENCE/ TRAINING	LIST RELATED EQUIPMENT, HARDWARE AND/OR SOFTWARE APPLICATIONS
<input type="checkbox"/>	GOLF RELATED		
<input type="checkbox"/>	RESTAURANT/BANQUET		
<input type="checkbox"/>	TURF MAINTENANCE		
<input type="checkbox"/>	SOFTWARE APPLICATIONS		
<input type="checkbox"/>	ACCOUNTING OR ADMINISTRATIVE		

SKILLS / ACHIEVEMENTS

Briefly summarize your knowledge and major skills / achievements which relate to the advertised position or, if this is a general application, to the position(s) that interests you. You may use this space to enter other information you would like us to consider in reviewing your application. Attach additional pages if required.

DRIVER'S LICENSE INFORMATION

Provide the following information if applying for a position where driving is a requirement.

Do you own a valid driver's license _____ ; List any restrictions pertaining to driving a vehicle _____

REFERENCES

Reference checks will be conducted to assess your past work performance and may include checks of attendance records. In addition to the references identified in the "Work History" section, you may wish to provide further references. If any references have known you by a previous name, please specify.

NAME	TELEPHONE NO.	RELATIONSHIP	NO. OF YEARS KNOWN
	()		
	()		
	()		

APPLICANT SIGNATURE

Your signature below is authorization on this application form as your consent that as a condition of being considered for employment at Copper Creek Golf Club, references about past work performance will be obtained from your current and previous employers. If you are presently employed, you will be notified prior to contact with your current employer.

I certify that the information provided in this application or attachments / resume is true and complete. I understand that if any information in this application or attachments / resume is found to be untrue or incomplete, my application may be rejected or I may be dismissed in the event that I am the successful applicant.

RESUME ATTACHED

DATE SIGNED
YYYY / MM / DD

X _____

SIGNATURE

Notes: For Interview Use Only
