

Pirate's Cove Adventure Golf

Employment Application

Date of Application

Print or type application information below (2 sides)

PERSONAL INFORMATION

Name:	Last		First							М	iddle	
Present Address: Street				City				State			Zip	
Permanent Address:			City			St	State			Zip		
Cell Phone #:												
Home Phone #						Mon	Tue	Wed	Thur	Fri	Sat	Sun
Dates Available:			Days /		From:							
			Hours									
Position(s) Applying For:			Availabl	е	То:							
If Under 18 Yrs. of age, please state your date of birth			Number o Date you		•	ested	per \	Veek				

How were you referred to Pirate's Cove?

EDUCATION

Turne of Colored	Type of School Name and Location of School					Did You	
Type of School	Name and LC	of Study	Attended	Graduate?			
High School (s)	Name	City	State	Degree / Area	Yrs:	Yes No	
	Name	City	State	Degree / Area	Yrs:	Yes No	
College (s)	Name	City	State	Degree / Area	Yrs:	Yes No	
	Name	City	State	Degree / Area	Yrs:	Yes No	
Grad. School	Name	City	State	Degree / Area	Yrs:	Yes No	
Other	Name	City	State	Degree / Area	Yrs:	Yes No	

ACTIVITIES / HONORS

Please list activities, organizations, honors

Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color or national origin of its members

EMPLOYMENT HISTORY

List employment starting with your most recent position. Please indicate if you were employed under another name

Were yo	a U.S ou eve	-			gal right and nec give name of co Yes / No	mpany (ies)	o work in the U		/ No
	Name Address				Work Pho			ears Known	
		ESS / SCHOLA		REFERENCE	S		Please do n	ot list relative	s
/ mo. yi		Phone							
mo. yı To:	r. /	Address		City	State	Supervisor	-	Final:	
From: /	1	Name				Your Job Title	Duties	Starting:	
/ mo. yi		Phone			_				
mo. yı To:	r. /	Address		City	State	Supervisor	{	Final:	
From: /	1	Name				Your Job Title	Duties	Starting:	
/ mo. yi		Phone							
то: То:				City	State	Supervisor	1	Final:	
/ mo. yi		Address		City	State	4			
mo. yı From:		Name				Your Job Title	Duties	Starting:	
To: /	F	Phone				Supervisor		r mai.	
mo. yı	r. /	Address		City	State	- Cuper isor	-	Final:	
From: /	1	Name				Your Job Title	Duties	Starting:	
Dates	1	Name and Address of E	mployer			Supervisor	Duties	Wages	Leaving
						Position Held /	List Major	Salary or	Reason for

PLEASE READ AND SIGN

Various federal, state, and local laws prohibit discrimination based on race, color, sex, religion, national origin, ancestry, age, disability or marital status.

Pirate's Cove is an equal opportunity employer and your response to any question will not be used as a basis for discrimination, but will be judged on its relevance to the position you are seeking.

In submitting this application for employment, I understand that an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history. I authorize anyone possessing this information to furnish it to Pirate's Cove and/or a 3rd party company upon request and I release anyone so authorized, Pirate's Cove, and any 3rd party company from all liability and damages whatsoever in furnishing, obtaining or using said information.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of Pirate's Cove.

I understand and agree that if employed, the employment will be "at will." That is, either I or Pirate's Cove may end the employment relationship at any time for any reason, or for no reason. I understand that receipt of this application by Pirate's Cove does not imply employment and that this application and/or anyother Pirate's Cove documents are not contracts of employment.

Applicant's Signature :	Date Signed
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After filling out both pages of this application, please drop it off or mail it to your local Pirate's Cove Adventure Golf. Thank you.