



SECESSION GOLF CLUB APPLICATION OF EMPLOYMENT
 (PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE _____

SOC. SEC. NO. _____

NAME

LAST

FIRST

MIDDLE

PRESENT ADDRESS

STREET

CITY

STATE

ZIP

PHONE NO. _____

ARE YOU 18 YEARS OR OLDER? Yes No

Yes

No

Are you eligible to work in the U.S.? Yes No

No

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW?	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?	
EVER APPLIED TO THIS COMPANY BEFORE?	WHERE?	WHEN?
REFERRED BY		

EDUCATION

EDUCATION	NAME AND LOCATION OF SCHOOL	*NO. OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK _____

SPECIAL SKILLS _____

ACTIVITIES: (CIVIC, ATHLETIC, ETC.) _____

Exclude organization, the name of which indicates the race, creed, sex, age, marital status, color or nation of origin of its members.

U.S. MILITARY OR NAVAL SERVICE

RANK

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

FORMER EMPLOYERS: (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST).

DATE MONTH AND YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

PROFESSIONAL REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST 1 YEAR.

	NAME	ADDRESS	BUSINESS	TELEPHONE NUMBER
1				
2				
3				

ADDITIONAL INFORMATION:

Have you ever been convicted of a felony? Yes _____ No _____

If yes, give details: _____

Have you ever been bonded? Yes _____ No _____

Have you ever been Refused Bond? Yes _____ No _____

Do you have a Valid S. C. Driver's License? Yes _____ No _____ License # _____

Have you ever worked for any other department at Seccession Golf Club? Yes _____ No _____ If yes, which department and reason for leaving: _____

**IN CASE OF
EMERGENCY NOTIFY:**

NAME	ADDRESS	PHONE NO.
------	---------	-----------

My signature verifies that the information provided in this application is true and complete. I understand that any false or misleading information provided by me in this application will result in immediate discharge. I further understand that if I am hired there is no employment contract, that I may be terminated or laid off at any time without advance notice at the will of the employer, that any verbal statements of any person to the contrary are void, and that an employment contract may be made only in writing by the company president or specified authorized official of the company. I authorize Seccession Golf Club to investigate any information contained in this application for employment, to contact my former employers, and to also conduct a background check on me.

DATE SIGNATURE

***Seccession Golf Club is a drug free work place and a drug test will be required prior to an offer of employment being confirmed. The Club reserves the right to require a drug test during employment in its sole discretion.**

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY

DATE

REMARKS:

NEATNESS	ABILITY
HIRED Yes No	DEPT.
SALARY/WAGE	DATE REPORTING TO WORK
APPROVED: 1.	2. 3.
EMPLOYMENT MANAGER	DEPT. HEAD GENERAL MANAGER

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination.



SECESSION GOLF CLUB

CONSENT FOR DRUG SCREENING

I, _____, understand that as a condition of my employment with SECESSION GOLF CLUB ("Secession"), I am required to take a drug screening test. I understand that failure to consent to this test will result in the termination of my employment. I hereby consent to provide a urine sample, pursuant to procedures set forth by Secession, and authorize Secession to arrange for screening tests to be conducted by a doctor, laboratory, hospital or medical facility of their choice. I also authorize such doctor(s) or facilities to release the results of such tests to a designated Secession representative. I understand that:

1. The results of the tests will be reported to Secession personnel who have need to know the results.
2. The results of the test may affect my employment with Secession.

I understand and accept the above terms and am willing to provide the specimen to be tested. I certify that the specimen being given is my own.

I hereby release and hold harmless Secession and its employees and agents from all liability whatsoever arising from this request to provide my specimen and the testing of my specimen.

I understand that nothing in this constant form is to be construed to be an employment contract between the parties and my employment with Secession remains at will.

I HAVE READ THE FOREGOING CONSENT FORM AND KNOW THE CONTENTS THEREOF AND SIGN THE SAME OF MY OWN FREE WILL.

Date

Applicant or Employee Signature

Printed Name of Applicant or Employee



SECESSION GOLF CLUB

DISCLOSURE AND AUTHORIZATION FORM TO OBTAIN CONSUMER REPORTS FOR EMPLOYMENT PURPOSES

Please Read Carefully Before Signing the Authorization

DISCLOSURE

In considering you for employment and, if you are employed, in considering you for subsequent promotion, assignment, reassignment, retention, or discipline, Seccession Golf Club ("the Company") may request and rely upon one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency, such as IntelliCorp Records, Inc.

IntelliCorp Records, Inc. can be contacted by mail at 3000 Auburn Dr, Suite 410; Beachwood, OH 44122; or phone: 1-888-946-8355; or website: www.intellicorp.net.

For explanation purposes:

- a "consumer report" is a written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in making an employment-related decision about you. Such information may include, for example, credit information, criminal history reports, or driving records; and
- an "investigative consumer report" is a consumer report in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your prior employers, neighbors, friends, or associates, or with others who may have knowledge concerning any such items of information. In the event an investigative consumer report is requested about you, you are entitled to additional disclosures regarding the nature and scope of the investigation requested, as well as a written summary of your rights under the Fair Credit Reporting Act ("FCRA").

Under the FCRA, before the Company can obtain a consumer report or investigative consumer report about you for employment purposes, we must have your written authorization. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

AUTHORIZATION

I have read and understand the foregoing Disclosure, and authorize Seccession Golf Club to obtain and rely upon consumer reports or investigative consumer reports in considering me for employment and, if I am employed, in considering me for subsequent promotion, assignment, reassignment, retention, or discipline. By my signature below, I authorize the Company to obtain any such reports and to share the information received with any person involved in the employment decision about me.

I do _____ do not _____ authorize you to contact *my current* employer for Employment and Reference Verifications

(This will authorize immediate inquiries to the Human Resources Department and to any listed supervisors or references in the Employment/Reference Section of your application.)

I also agree that this Disclosure and Authorization in original, faxed, photocopied, or electronic (including electronically signed) form will be valid for any consumer reports or investigative consumer reports that may be requested about me by or on behalf of the Company.

Printed Name

Applicant Signature

Date

Parent or Legal Guardian Signature
(for searches conducted on minors under
the age of 18)

Date

Personal Data

_____ Last Name	_____ First Name	_____ Middle Name
_____ Current Address		_____ Dates Lived Here
_____ Addresses for the Past Seven Years: (include street, city, state, zip code)		_____ Dates of Residence:
_____ _____		_____ _____
_____ _____		_____ _____
_____ Date of Birth	_____ Other Names Used (including maiden name)	_____ Years Used
_____ Social Security Number	_____ Driver's License #	_____ State
_____ Email address (may be used for official correspondence)		

I have the right to make a request to **IntelliCorp Records, Inc**, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which **IntelliCorp Records, Inc** has previously furnished within the two year period preceding my request.

I certify that all elements of the personal data I have provided are true, accurate and complete. I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of employment.

_____ Printed Name	_____ Applicant Signature	_____ Date
-----------------------	------------------------------	---------------



SECESSION GOLF CLUB

PLEASE MAIL OR FAX APPLICATIONS TO:

**SECESSION GOLF CLUB
142 SECESSION DRIVE
BEAUFORT, SC 29907**

FAX: (843) 522-4657