

EMPLOYMENT APPLICATION *page 1*

BASIC INFORMATION *(please print)*

Complete the application and email to work@theravensclub.com OR drop of at TRC between the hours of 4-5pm on weekdays.

Please attach resumé if available.

DATE

NAME

STREET CITY/STATE/ZIP

PHONE NUMBER EMAIL

HOW WERE YOU REFERRED TO US? NAME?

OTHER IMPORTANT INFORMATION

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? YES NO (CIRCLE ONE)
 Proof of identity and eligibility will be required upon employment

ARE YOU AT LEAST 18 YEARS OF AGE? YES NO (CIRCLE ONE)

IF NOT, YOU MUST PROVIDE A WORK PERMIT. INCLUDED? YES NO (CIRCLE ONE)

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? YES NO (CIRCLE ONE)
 If yes, please provide details (feel free to use another sheet of paper, if necessary). An affirmative answer will not automatically disqualify you from being considered as a candidate for employment.

DATE PLACE

NATURE

PERSONAL OR PROFESSIONAL REFERENCES (NOT RELATED)

NAME #1 PHONE

ADDRESS OCCUPATION

NAME #2 PHONE

ADDRESS OCCUPATION

NAME #3 PHONE

ADDRESS OCCUPATION

EDUCATIONAL INFORMATION

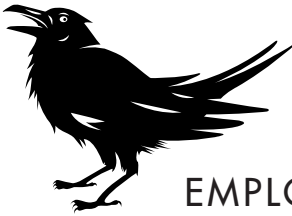
School	City/State	# Years	Degree/Major	Completed? YES NO
HIGH SCHOOL				
COLLEGE				
OTHER				

ADDITIONAL EXPERIENCE OR QUALIFICATIONS

PLEASE LIST ANY OTHER EXPERIENCES, SKILLS OR QUALIFICATIONS INCLUDING HOBBIES, WHICH SHOULD BE CONSIDERED IN EVALUATING YOUR QUALIFICATIONS

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WHAT KIND OF WORK SCHEDULE WOULD YOU LIKE?

FULL-TIME? PART-TIME? TEMPORARY UNTIL WHEN?

PLEASE LIST THE TIMES YOU ARE AVAILABLE TO WORK

WHEN ARE YOU AVAILABLE TO BEGIN WORKING? WHAT ARE YOUR PAY/SALARY REQUIREMENTS?

ARE YOU APPLYING FOR A SPECIFIC JOB OPENING? YES? IF SO, SPECIFY

DO YOU HAVE ANY COMMITMENTS TO ANOTHER EMPLOYER THAT MIGHT AFFECT YOUR EMPLOYMENT WITH US? YES NO (CIRCLE ONE)

IF YES, PLEASE EXPLAIN

WORK HISTORY

EMPLOYER #1	JOB TITLE	SUPERVISOR
ADDRESS	EMAIL	TELEPHONE
MAY WE CONTACT THIS EMPLOYER? YES NO (CIRCLE ONE)		EMPLOYED FROM TO
DUTIES	REASON FOR LEAVING	

EMPLOYER #2	JOB TITLE	SUPERVISOR
ADDRESS	EMAIL	TELEPHONE
MAY WE CONTACT THIS EMPLOYER? YES NO (CIRCLE ONE)		EMPLOYED FROM TO
DUTIES	REASON FOR LEAVING	

EMPLOYER #3	JOB TITLE	SUPERVISOR
ADDRESS	EMAIL	TELEPHONE
MAY WE CONTACT THIS EMPLOYER? YES NO (CIRCLE ONE)		EMPLOYED FROM TO
DUTIES	REASON FOR LEAVING	

AGREEMENT

I hereby affirm that the information provided on this application (and accompanying resumé, if any) is true to the best of my knowledge. I also agree that falsifying information or significant omissions may disqualify me from further consideration for employment and may be considered for dismissal if discovered at a later date.

I understand that my employment can be terminated, with or without cause, at any time at the discretion of either the company or myself. I understand that no management official other than partners of The Ravens Club has the authority to enter into any agreement contrary to the foregoing or make and oral assurance or promise of continued employment.

I authorize persons, schools, my current employer, and previous employers and organizations named in this application (and accompanying resumé, if any) to provide any relevant information that may be required to arrive at an employment decision. This includes The Ravens Club ability to obtain a report of my credit history, driving record and other information that may be necessary to make an employment decision.

SIGNATURE

DATE