



# The Kingsbury Club Medfield

APPLICATION FOR EMPLOYMENT		DATE		
<b>PERSONAL INFORMATION</b>				
NAME		EMAIL		
ADDRESS	CITY	STATE	ZIP	
HOW LONG				
TELEPHONE				
IF UNDER 18, PLEASE LIST AGE		DO YOU HAVE A DRIVER'S LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
HAVE YOU EVER BEEN IN THE ARMED FORCES?		<input type="checkbox"/> YES <input type="checkbox"/> NO		
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?		<input type="checkbox"/> YES <input type="checkbox"/> NO		
SPECIALTY	DATE ENTERED	DISCHARGE DATE		
HAVE YOU EVER BEEN CONVICTED OF A CRIME?		<input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES, EXPLAIN NUMBER OF CONVICTION(S), NATURE OF OFFENSE(S) LEADING TO CONVICTIONS(S), HOW RECENTLY SUCH OFFENSE(S) WAS/WERE COMMITTED, SENTENCE(S) IMPOSED, AND TYPE(S) OF REHABILITATION.				
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY				
ADDRESS	RELATIONSHIP	TELEPHONE		
<b>EMPLOYMENT DESIRED</b>				
POSITION APPLIED FOR		SALARY DESIRED		
EMPLOYMENT DESIRED: <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME				
WHEN CAN YOU START?		HOW DID YOU HEAR ABOUT THIS POSITION?		
<b>EDUCATION</b>				
Type of School	Name of School	Location	Years Completed	Major & Degree
HIGH SCHOOL				
COLLEGE				
BUS./TRADE SCHOOL				
PROFESSIONAL SCHOOL				
<b>REFERENCES</b>				
Please list three references other than relatives that you have known at least one year.				
1. NAME	COMPANY			
TELEPHONE	YEARS KNOWN	ADDRESS		
2. NAME	COMPANY			
TELEPHONE	YEARS KNOWN	ADDRESS		
3. NAME	COMPANY			
TELEPHONE	YEARS KNOWN	ADDRESS		
<b>BACKGROUND</b>				
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.				

**WORK/VOLUNTEER EXPERIENCE**

Please list your work/volunteer experience for the past four jobs, beginning with the most recent. If you were self-employed, give firm name. Attach additional sheets if necessary.

Date	Name/Address of Employer	Salary	Position	Reason for leaving
FROM				
TO				
List jobs held, duties performed, skills used or learned, advancements or promotions				
FROM				
TO				
List jobs held, duties performed, skills used or learned, advancements or promotions				
FROM				
TO				
List jobs held, duties performed, skills used or learned, advancements or promotions				
FROM				
TO				
List jobs held, duties performed, skills used or learned, advancements or promotions				

MAY WE CONTACT YOUR PRESENT EMPLOYER?  YES  NO

DID YOU COMPLETE THIS APPLICATION YOURSELF?  YES  NO

IF NOT, WHO DID?

**WAIVER (PLEASE READ CAREFULLY)**

I understand that, if hired by the Kingsbury Club, my employment would be "at-will" and could be terminated at any time by either party, with or without cause and with or without notice.

I certify that the statements I have made are true and correct to the best of my knowledge. I understand that the submission of any false information or the omission of any requested information in connection with my application for employment, whether on this document or not, may be cause for failure to hire or for immediate discharge should I be employed by the Kingsbury Club.

I further understand that my employment with the Kingsbury Club shall consist of a 60 day orientation period, that at any time during this period or thereafter, my employment relation with the Kingsbury Club is terminable at will for any reason by either party.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

The Kingsbury Club is an equal employment opportunity employer.  
Thank you for completing this form and for your interest in our business.