

## Campus Club Milledgeville Employment Application Form

**PLEASE PRINT ALL  
INFORMATION REQUESTED  
EXCEPT SIGNATURE**



DATE \_\_\_\_\_

Name \_\_\_\_\_  

Last
First
Middle
Maiden

Present address \_\_\_\_\_  

Number
Street
City
State
Zip

How long \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

If under 18, please list age \_\_\_\_\_

Position applied for (1) \_\_\_\_\_  
 and salary desired (2) \_\_\_\_\_  
 (Be specific)

Days/hours available to work  
 No Pref \_\_\_\_\_ Thur \_\_\_\_\_  
 Mon \_\_\_\_\_ Fri \_\_\_\_\_  
 Tue \_\_\_\_\_ Sat \_\_\_\_\_  
 Wed \_\_\_\_\_ Sun \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_ Can you work nights? \_\_\_\_\_

Employment desired     FULL-TIME ONLY     PART-TIME ONLY     FULL- OR PART-TIME

When available for work? \_\_\_\_\_

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME?     No     Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_  
 \_\_\_\_\_

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APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? \_\_\_\_\_

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_  Operator  Commercial (CDL)  Chauffeur  
Expiration date \_\_\_\_\_

Have you had any accidents during the past three years? How many? \_\_\_\_\_

Have you had any moving violations during the past three years? How Many? \_\_\_\_\_

OFFICE ONLY

Typing  Yes  No \_\_\_\_\_ WPM  
10-key  Yes  No \_\_\_\_\_ WPM  
Word Processing  Yes  No \_\_\_\_\_ WPM  
Personal Computer  Yes  No PC  Mac  Other \_\_\_\_\_  
Skills \_\_\_\_\_

Please list two references other than relatives or previous employers.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone ( ) _____	Telephone ( ) _____

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.

Large empty rectangular box for providing additional information.

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**APPLICATION FOR EMPLOYMENT**

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

**Work Experience** Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your Last Job Title		
Reason for leaving (be specific)			
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	Your last job title		
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List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer?  Yes  No

Did you complete this application yourself  Yes  No

If not, who did? \_\_\_\_\_

# Reference Check Permission Form

I \_\_\_\_\_ give Campus Club Milledgeville permission to contact the references listed below to discuss my suitability as a CC Milledgeville employment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Do not list relatives.*

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## Reference One

Name: \_\_\_\_\_

*first*

*initial*

*last*

Address: \_\_\_\_\_

*number*

*street*

*Apt No., Unit No., P.O Box*

\_\_\_\_\_  
*City/Town*

\_\_\_\_\_  
*Postal Code:*

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Best time to call?  a.m.  p.m.

Cell #: \_\_\_\_\_

Relationship to the candidate: \_\_\_\_\_

Length of relationship: \_\_\_\_\_

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## Reference Two

Name: \_\_\_\_\_

*first*

*initial*

*last*

Address: \_\_\_\_\_

*number*

*street*

*Apt No., Unit No., P.O Box*

\_\_\_\_\_  
*City/Town*

\_\_\_\_\_  
*Postal Code:*

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Best time to call?  a.m.  p.m.

Cell #: \_\_\_\_\_

Relationship to the candidate: \_\_\_\_\_

Length of relationship: \_\_\_\_\_

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## Reference Three

Name: \_\_\_\_\_

*first*

*initial*

*last*

Address: \_\_\_\_\_

*number*

*street*

*Apt No., Unit No., P.O Box*

\_\_\_\_\_  
*City/Town*

\_\_\_\_\_  
*Postal Code:*

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Best time to call?  a.m.  p.m.

Cell #: \_\_\_\_\_

Relationship to the candidate: \_\_\_\_\_

Length of relationship: \_\_\_\_\_

**Photographs and Video Consent,  
Waiver, Indemnity and Release (Long Form)**

**Photographs, Videos and Recordings**

I hereby grant permission to Campus Club Milledgeville and its representatives to take photographs or videos of me and to make recordings of my voice at any Campus Club Milledgeville event/program.

First and Last Name (Printed) \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

Parent/Guardian Name (if under age 18) \_\_\_\_\_

Date \_\_\_\_\_

I further grant to Campus Club Milledgeville and its representatives the right to reproduce, use, exhibit, display, broadcast and distribute and create derivative works of these images and recordings in any media now known or later developed as well as my name for promoting, publicizing or explaining Campus Club Milledgeville and its activities and for administrative, educational or research purposes. I acknowledge that Campus Club Milledgeville owns all rights to the images and recordings.

**Waiver, Indemnity and Release**

I hereby waive any right to inspect or approve the use of the images or recordings or of any written copy. I further waive all moral rights. I also waive any right to royalties or other compensation arising from or related to the use of the images, recordings, or materials.

I hereby release, defend, indemnify and hold harmless Campus Club Milledgeville, its Board of Governors, officers, employees or agents from and against any claims, damages or liability arising from or related to the use of the images, recordings or materials, including but not limited to claims of defamation, invasion of privacy, or rights of publicity or copyright infringement, or any misuse, distortion, blurring, alteration, optical illusion or use in composite form that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

I am 18 years of age or older and I am competent to contract in my own name. I have read this document before signing below, and I fully understand the contents, meaning and impact of this consent, waiver, indemnity and release. This consent, waiver, indemnity and release is binding on me, my heirs, executors, administrators and assigns.

\_\_\_\_\_  
Signature (if age 18 or older) Date

\_\_\_\_\_  
Signature of Parent/Guardian (if under age 18) Date

\_\_\_\_\_  
Signature of Witness Date

**Background Investigation Questionnaire**

Confidential

*I understand that this form will be kept separately from my application and that the information regarding my date of birth, place of birth and listed physical characteristics will not be available to the public. I further understand that any employment decision will be made based on my qualifications, employment record and police record as related to the requirements of the position for which I am being considered.*

NAME \_\_\_\_\_

**Last**

**First**

**Middle**

*Other names used: (Maiden name, names by former marriages, former names changed legally or otherwise: Aliases, nicknames, etc. Specify which and show dated used) \_\_\_\_\_*

\_\_\_\_\_  
\_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

**Number**

**Street**

\_\_\_\_\_  
**City** **State** **Zip**

DOB \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_ RACE \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ EYE COLOR \_\_\_\_\_ HAIR COLOR \_\_\_\_\_

**Have you ever been arrested by Federal, State or other law enforcement authorities for any violation of any federal law, state law, county or municipal law, regulation or ordinance? (Do not include anything that happened before your 17<sup>th</sup> birthday.**

**Do not include minor traffic violations for which a fine of \$ 35.00 or less was imposed. All other arrests must be included even if they were pardoned)      YES       NO**

**List all arrests to include date, location and agency involved \_\_\_\_\_**

\_\_\_\_\_

**I hereby authorize \_\_\_\_\_ to receive any criminal history record information pertaining to me, which may be in the files of any local, state or federal agency. I hereby release Campus Club Milledgeville and their employees and agents from any and all liability arising from this authorization for the subsequent review of the information disclosed pursuant to this authorization.**

\_\_\_\_\_

FULL NAME PRINTED

\_\_\_\_\_

LEGAL SIGNATURE

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**PLEASE READ CAREFULLY**

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**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Campus Club Milledgeville (hereinafter called "CCM "), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of CCM, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of Campus Club Milledgeville . Both the undersigned and CCM may end the employment relationship at any time, without specified notice or reason. If employed, I understand that Campus Club Milledgeville may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Campus Club Milledgeville permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release Campus Club Milledgeville from any liability as a result of such contract.

I also understand that (1) Campus Club Milledgeville has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I further understand that my employment with Campus Club Milledgeville shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with Campus Club Milledgeville is terminable at will for any reason by either party.

**Signature of applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

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This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.