



APPLICATION FOR EMPLOYMENT

IF YOU NEED ASSISTANCE TO COMPLETE THIS APPLICATION PLEASE CONTACT HUMAN RESOURCES AT 814-371-0711 x 102

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

Please Print

Position Desired: Department: Security, Admin, Golf Pro-Shop/Carts, Golf Maintenance, Recreation, KOA, General Maint, Food & Beverage. Includes checkboxes for Full-time/Part-Time.

Salary Expectations: Date Available:

PERSONAL DATA

How did you learn of this position?

Name (Last, First, Middle Initial) Email

Present Address (Street and Number) How long have you lived there? (Years/Months)

City State Zip Code

Home Telephone () Cell Phone ()

Are you at least 14 years of age? Are you at least 18 years of age?

Have you ever worked for Treasure Lake POA before?

If yes, please give dates and position:

Do you have any immediate family working here?

If Yes, Name(s) Relationship:

Have you ever been convicted of a criminal offense, had adjudication of a crime withheld, or pled nolo contendere, "no contest", to a crime or have any criminal charges pending including but not limited to robbery, embezzlement, forgery, perjury, drugs, tax evasion or any criminal offense involving dishonesty or breach of trust?

Blank lines for providing details of criminal offenses.

Have you ever been a defendant in a civil suit on an intentional tort (assault, battery, invasion of privacy, intentional infliction of distress, intentional wrongful death)? If yes, please provide details:

EDUCATION

School Name	Years Completed (circle)	Diploma or Degree	Describe course of study or major	Describe Specialized Training, Experience, Skills, Extra-Curricular Activities
Elementary	4 5 6 7 8			
High School	9 10 11 12			
College / University	1 2 3 4			
Graduate / Professional	1 2 3 4			
Trade / Correspondence				

PERSONAL REFERENCES

Please list people who know you well - please do not include previous employers or relatives.

Name	Occupation	Address	Phone #	# Years Known

PREVIOUS EXPERIENCE

Please describe any experiences, professional licenses, and certifications you have which you feel would assist you in performing the job for which you are applying. _____

RECORD OF PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with the present or most recent employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give the firm name and supply business references. Please do not indicate "see resume".

Present or Past Employer _____ Name _____ Address _____ City, State, Zip Code _____ Telephone _____	<u>Employed</u> From (mo/yr) _____ To (mo/yr) _____ <u>Pay</u> Start \$ _____ Final \$ _____	<u>Your Title or Position</u> _____ <u>Name and Title of Last Supervisor</u> _____	<u>Reason for leaving or wanting to leave</u> _____ May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Present or Past Employer _____ Name _____ Address _____ City, State, Zip Code _____ Telephone _____	<u>Employed</u> From (mo/yr) _____ To (mo/yr) _____ <u>Pay</u> Start \$ _____ Final \$ _____	<u>Your Title or Position</u> _____ <u>Name and Title of Last Supervisor</u> _____	<u>Reason for Leaving</u> _____
Present or Past Employer _____ Name _____ Address _____ City, State, Zip Code _____ Telephone _____	<u>Employed</u> From (mo/yr) _____ To (mo/yr) _____ <u>Pay</u> Start \$ _____ Final \$ _____	<u>Your Title or Position</u> _____ <u>Name and Title of Last Supervisor</u> _____	<u>Reason for Leaving</u> _____

APPLICANT'S STATEMENT

I understand that if I am hired, my employment will be at-will. The Treasure Lake Property Owners Association (Association) or I have the right to terminate the employment relationship at any time, for any reason, with or without notice or cause. I understand that only the General Manager and/or the Board of Directors of the Association has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Association reserves the right to require me to submit to pre-employment testing and background checks.

Dependent upon the position, this may include, but is not limited to, drug and alcohol tests, consumer reports which include criminal records clearance, child abuse history clearance, fingerprinting, credit checks, department of motor vehicle checks, and medical examinations to the extent permitted by law. This document will serve as written notice and authorization for the Association to obtain such consumer report(s) on me in connection with my application for employment, my continued employment or for other employment-related reasons. If hired, this authorization shall remain on file and serve as an ongoing authorization for procurement of employment-related reports at any time during my employment. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.

I further understand that the Association may contact my previous employers and I authorize those employers to disclose to the Association all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the Association.

By signing below, I certify that all the information I provide on this application and in any interview is true, complete, and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I will be terminated.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THIS STATEMENT

Signature of Applicant

Date

OFFICE USE

Arrange Interview: Yes No Hire: Yes No Start Date: _____

Full-time Part-time Seasonal Regular

Rate of Pay: _____ Hourly Salary DOB: _____

Job Title: _____

Dept: _____

Supervisor: _____ Date: _____

GM: _____ Date: _____