

Please Email application to
Contact@alohaminiglowgolf.com
or turn it in



Circle one location:

Northshore Mall
Mall of New Hampshire
South Shore Plaza
Cape Cod Mall

Instructions: *Print clearly in black or blue ink. Answer all questions front/back.*

Sign and date the form.

PERSONAL INFORMATION:

Date: _____

First Name _____

Street Address _____

Middle Name _____

Last Name _____

City _____ Zip Code _____

Phone Number (____) _____

e-mail: _____

Birthday: _____

Are you eligible to work in the United States?

Yes _____ No _____

If you are under age 18, do you have an employment/age certificate?

Yes _____ No _____

Have you been convicted of or pleaded no contest to a felony within the last five years?

If yes, please explain: _____

Yes _____ No _____

POSITION/AVAILABILITY:

Position Applied For: _____

What date are you available to start work? _____

Working Hours: 9AM - 9PM/10PM

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Hours Available:	Hours Available:	Hours Available:	Hours Available:	Hours Available:	Hours Available:	Hours Available:

EDUCATION: Name and Address Of School - Degree/Diploma - Graduation Date

SKILLS and QUALIFICATIONS: Licenses, Skills, Training, Awards, Experiences

EMPLOYMENT HISTORY:

Present Or Last Position:

Employer: _____ Address: _____
Supervisor: _____
Phone: _____ Email: _____
Position Title: _____ From: _____ To: _____
Responsibilities: _____

Salary/Wage: _____ Reason for Leaving: _____

=====

Previous Position:

Employer: _____ Address: _____
Supervisor: _____
Phone: _____ Email: _____
Position Title: _____ From: _____ To: _____
Responsibilities: _____

Salary/Wage: _____ Reason for Leaving: _____

May We Contact Your Present Employer? Yes _____ No _____

References:

Name/Title Address Phone

- 1) _____
- 2) _____
- 3) _____

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature _____ Date _____

FOR EMPLOYEE USE ONLY Collected by:

Date: