

Please Email application to  
[Contact@alohaminiglowgolf.com](mailto: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:**

First Name \_\_\_\_\_

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

Middle Name \_\_\_\_\_

Street Address \_\_\_\_\_

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:						

**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: