



**Linville Resorts, Inc**  
**Application for Employment**

**PERSONAL INFORMATION**

*Incomplete information could disqualify you from further consideration. Please complete all fields.*

Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Mobile Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Are you eligible to work in the U.S? \_\_Yes \_\_No

Are you at least 18 years or older? \_\_Yes \_\_No

*(If no, you may be required to provide authorization to work.)*

Have you ever been terminated from employment or asked to resign by an employer? \_\_Yes \_\_No

**If yes**, please provide company names and details \_\_\_\_\_

Can you work any shift? \_\_\_\_\_ If no, explain: \_\_\_\_\_

Can you work overtime, including weekends? \_\_Yes \_\_No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? \_\_Yes \_\_No

**EMPLOYMENT DESIRED**

Date you can start \_\_\_\_\_ If seasonal; date you must leave \_\_\_\_\_

Position desired \_\_\_\_\_

Other positions desired \_\_\_\_\_

If seasonal, do you require housing? \_\_\_\_\_

**EDUCATION**

School	Name, City, State	Highest Year Completed	Type of Degree
High School			
College or University			
College or University			
College or University			

**EMPLOYMENT HISTORY** Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time.  
*Incomplete information could disqualify you from further consideration.*

Company Name, City, State	
Employment Dates	
Supervisor Name/Contact Info	
Position/Job Responsibilities	
Reason for Leaving	
Company Name, City, State	
Employment Dates	
Supervisor Name/Contact Info	
Position/Job Responsibilities	
Reason for Leaving	
Company Name, City, State	
Employment Dates	
Supervisor Name/Contact Info	
Position/Job Responsibilities	
Reason for Leaving	
Company Name, City, State	
Employment Dates	
Supervisor Name/Contact Info	
Position/Job Responsibilities	
Reason for Leaving	

Are you currently employed? ☐ Yes ☐ No

If so, may we inquire of your present employer? ☐ Yes ☐ No

Contact Information \_\_\_\_\_

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

\_\_\_\_\_

**Please read carefully before signing.**

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Linville Resorts, Inc. to hire me. Employment with Linville Resorts, Inc. is "at-will" and, if I am hired, I understand that either Linville Resorts, Inc. or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Linville Resorts, Inc. has the authority to make any assurance to the contrary.

Linville Resorts, Inc. is an equal opportunity employer. Linville Resorts, Inc. does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

I attest with my signature below that I have given to Linville Resorts, Inc. true and complete information on this application. No requested information has been concealed. I authorize Linville Resorts, Inc. to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal. Typing my name will constitute my electronic signature.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Please return applications via email to [sarah@linvillegolfclub.com](mailto:sarah@linvillegolfclub.com).