

EMPLOYMENT APPLICATION

General Instructions for Completing Application	Applicant Notice	
 Complete all information within this application in its entirety using the fillable forms. Specify the position for which you are applying. Submit application to: The Moorings Yacht & Country Club, Attn: HR Manager Email: HR1@themooringsclub.com 	The Moorings Club, Inc. is an "at will" Equal Employment Opportunity employer. The Moorings Club, Inc. employs individuals without regard to race, color, sex, national origin, age, handicap, disability, citizenship or marital status. The Moorings Club, Inc. is a drug and alcohol free workplace.	
Position Applied For:		
Position:	Date of Application:	
Have you applied to The Moorings before: □ Yes □ No	Date you can start:	
Referred by:	Days/Hours you cannot work:	
Personal Information		
Last Name:	First Name:	
Street Address:	City, State, Zip:	
E-mail:	Phone:	
Are you at least 18 years of age: □ Yes □ No	If not 18, please state age (for Child Labor Law purposes):	
Are you able to provide documentation verifying you are legally eligible to work in the U.S.? : \square Yes \square No	Have you served in the U.S. Armed Forces? : □ Yes □ No If yes, which branch:	
Have you ever been convicted of a felony crime: \square Yes \square No If yes, please explain below the 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. No applicant will be denied employment solely on the basis of an arrest and/or conviction of a criminal offense. The date and nature of the offense, including significant details, surrounding circumstances, and relevancy to the position(s) applied for may, however, be considered.		
EDUCATION		
High School		
Name/Location of School:	Received: □ Diploma □ Other □ None	
	Number of years completed:	
College		
Name/Location of School:	Area of Study:	
Highest Level Completed:	Year Attended:	
Trade/Business School		
Name of School:	Area of Study:	
Certificate Achieved:	Year(s) Attended:	
Professional Designation(s) Achieved		
Name & Date:		



FORMER EMPLOYERS PLEASE INCLUDE LAST FOUR EMPLOYERS

Employment Date Start/End	Employer Name / Address	Position	Reason for Leaving	
Have you ever	been discharged or asked to resign from previous emplo	yment? □ Yes □ No	_	
If yes, please explain:				
•	ny relatives that are members of The Moorings Club?			
Do you have any relatives who work for The Moorings Club?				
If your answer is yes to either, please provide specific details below				
"I certify that the facts contained in this application are true and complete and understand, if employed, any falsified statements on this application may be				
grounds for dismissal I understand where permissible under applicable federal, Florida, and local law, I may be subject to pre-employment background check after receiving a conditional offer of employment to investigate my criminal background, driving record, credit history, and other matters related to my suitability				
-	understand that a separate disclosure and consent form will be provide			
I understand that if I fail to answer any question, or if I give misleading or incomplete answers to any question, that alone is sufficient basis for failure to hire me,				
or if I have been hired, that alone is sufficient basis for my immediate termination. I also understand that this is an application for employment and that no employment contract is being offered. I agree and acknowledge that if I am offered employment by The Moorings Club, Inc. my employment can be terminated,				
with or without cause or notice, at any time by me or The Moorings Club, Inc."				
Electronic Applicar	nt Signature	Date		
		5410		
In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required				
employment eligibility verification document form upon hire.				

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