



Iron Horse Golf Club

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

Name _____			Date of application _____		
LAST	FIRST	MIDDLE			
Address _____		City _____	State _____	Zip _____	
Telephone _____			Email _____		

1. GENERAL INFORMATION:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation? Yes No

Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.) No Yes If yes, explain _____

2. EDUCATION & TRAINING:

Circle last grade completed .Grade 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters _____ Doctorate _____

Name & Address of School	Major/ Course studied	Graduated or degree (Y/N)	Average Grade
Last High School Attended			
Address:			
College or University			
Address:			
College or University			
Address:			
Other (Technical, Vocational, Graduate, etc.)			
Address:			
List any scholarships, academic honors, awards or special achievements:			

3. SKILLS Please list any skills you have that are appropriate for the position you are applying for:

If required, will you work?	Rotating shifts <input type="checkbox"/> YES <input type="checkbox"/> NO	Saturdays <input type="checkbox"/> YES <input type="checkbox"/> NO	Full-Time <input type="checkbox"/>
	Overtime <input type="checkbox"/> YES <input type="checkbox"/> NO	Sundays <input type="checkbox"/> YES <input type="checkbox"/> NO	Part-Time <input type="checkbox"/>
Position/Department applying for, be specific:		Salary Requirements <input type="checkbox"/> per hour	
		\$ <input type="checkbox"/> per month	
<input type="checkbox"/> Food & Beverage	<input type="checkbox"/> Culinary	<input type="checkbox"/> Golf Course Maintenance	<input type="checkbox"/> Outdoor Pursuits
<input type="checkbox"/> Outside Services/Pro Shop	<input type="checkbox"/> Caddie Services	<input type="checkbox"/> Locker Room	<input type="checkbox"/> Marina <input type="checkbox"/> Pool
<input type="checkbox"/> Facility Maintenance			

State fully why you believe you are qualified for this position: _____

Date you can start: ____ / ____ / ____

Attention: Human Resources
 FAX: (406) 863-3103
 Address: Iron Horse Golf Club
 2150 Iron Horse Drive
 Whitefish, MT 59937
 Email: gevans@ironhorsemnt.com

4. EMPLOYMENT HISTORY

Starting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL EMPLOYMENT for at least the past **THREE** employers. If currently employed, may we contact your employer? Yes No

FULL NAME OF COMPANY:	POSITION HELD:
STREET ADDRESS:	TELEPHONE: ()
NAME & TITLE OF SUPERVISOR:	WAGE/SALARY:
JOB SUMMARY	
REASON FOR LEAVING:	DATE EMPLOYED: From /To

FULL NAME OF COMPANY:	POSITION HELD:
STREET ADDRESS:	TELEPHONE: ()
NAME & TITLE OF SUPERVISOR:	WAGE/SALARY:
JOB SUMMARY	
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FULL NAME OF COMPANY:	POSITION HELD:
STREET ADDRESS:	TELEPHONE: ()
NAME & TITLE OF SUPERVISOR:	WAGE/SALARY:
JOB SUMMARY	
REASON FOR LEAVING:	DATE EMPLOYED: From /To

5. OTHER SKILLS & QUALIFICATIONS

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

6. REFERENCES

List 3 references names, telephone numbers, and years known (do not include relatives or employers):

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information. Your social security information may be requested for employment and/or background verification.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required tune shall result m immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____ **Date:** _____