



EMPLOYMENT APPLICATION

Name			
Address	Last	First	M.I.
Contact Information	Street Address	City	State Zip Code
Position Applying For:	Home Phone	Cell Phone	Email
			Salary Requirements: \$ <input type="checkbox"/> Per Hour <input type="checkbox"/> Per Month
Have you worked for one of our properties before?	<input type="checkbox"/> Gozzer Ranch <input type="checkbox"/> Eddie's Bar & Grill <input type="checkbox"/> Hutton's General Store <input type="checkbox"/> Other Discovery Land Company Property (list below)		Date Available: ___ / ___ / ___
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"/>

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

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:

Educational Level	Name	City	State	Circle Yrs. Completed	Units Completed	Degree	Major
High School				9 10 11 12			
Community or Jr. College				1 2			
Business or Trade School				1 2			
College or University				1 2 3 4			
Graduate School							

3. SKILLS AND QUALIFICATIONS: Please list any job-related training, skills, licenses, certificates, and/or other qualifications:

(Application continues on back)

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

FROM (MO./YR.) _____ TO (MO./YR.): _____ TOTAL _____ YRS. _____ MOS.	POSITION HELD: _____
FULL NAME OF COMPANY: _____	SALARY: _____
STREET ADDRESS: _____	(AREA CODE) TELEPHONE: _____
NAME & TITLE OF SUPERVISOR: _____	
JOB SUMMARY: _____	
REASON FOR LEAVING: _____	

FROM (MO./YR.) _____ TO (MO./YR.): _____ TOTAL _____ YRS. _____ MOS.	POSITION HELD: _____
FULL NAME OF COMPANY: _____	SALARY: _____
STREET ADDRESS: _____	(AREA CODE) TELEPHONE: _____
NAME & TITLE OF SUPERVISOR: _____	
JOB SUMMARY: _____	
REASON FOR LEAVING: _____	

FROM (MO./YR.) _____ TO (MO./YR.): _____ TOTAL _____ YRS. _____ MOS.	POSITION HELD: _____
FULL NAME OF COMPANY: _____	SALARY: _____
STREET ADDRESS: _____	(AREA CODE) TELEPHONE: _____
NAME & TITLE OF SUPERVISOR: _____	
JOB SUMMARY: _____	
REASON FOR LEAVING: _____	

5. REFERENCES:

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

Name	Telephone Number	Years Known	Relationship

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.

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 time shall result in 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:** _____

Mail to: Gozzer Ranch Golf and Lake Club, Attn: Human Resources, 6308 S. Gozzer Road, Harrison, ID 83833

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.