Employment Application

Conanicut Yacht Club

Full Name:	Alias:				
Home Address:					
Mailing Address:					
Home Phone:		Cell Phone:			
Email address:					
Emergency Contact Informa	ation:				
Name					
Address					
Home Phone: Cell/Business Phone:					
What is your highest level o	f education c	ompleted:			
School Name:					
School Address:					
Degree and/or Certificate:					
Date Available to Start:		Last day o	of work:		
Are you 16 or older?	If 'yes', when:				
Have you ever worked for C	YC?				
Are you a citizen of the Unit	ted States?				
If not, are you legally allowed	ed to work in	the United States?	·		
Type of employment:	Full-time	Part-time	Seasonal	Temporary	
What position are you apply	ying for:				
Summary of skills or qualifications:					
Equal employement is available to every Previous Employment				on/interview.	
		ii iiiost receiit			
Dates of Employment:	From		To/_		
Company Name:	Phone Number:				
Company Address:					
Supervisor:			<u> </u>		
Position held:		Sa	lary:		
Responsibilities:					
Reason for leaving:					
May we contact this emp	loyer for a re	eference?			

Dates of Employment: From//						
Company Name:	Phone Number:					
Company Address:						
Supervisor:						
Position held:	Salary:					
Responsibilities:						
Reason for leaving:						
May we contact this employer for a reference?						
Dates of Employments - Engine / /	T- /					
Dates of Employment: From// Company Name:						
	Phone Number.					
Company Address:						
Supervisor:	Colonia					
Position held:	Salary:					
Responsibilities:						
Reason for leaving:						
Reason for leaving.						
May we contact this employer for a reference?						
I certify that my answers are true and complete to the best	of my knowledge. I authorize you to make such					
investigations and inquiries of my personal, employment, educational, financial and other related matters as may						
be necessary for an employment decision. I hereby release	employers, schools or individuals from all liability					
when responding to inquiries in connection with my application.						
In the event I am employed, I understand false or misleading information may result in discharge.						
Signature of Applicant:	Date:					