



Multnomah Athletic Club

"The Multnomah Athletic Club's mission is to enrich lives, foster friendships and build upon our traditions of excellence in athletic, social and educational programs."

APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

Each section and question must be fully and accurately answered. No action will be taken on an incomplete application. Please print, except for signature on back of application. Multnomah Athletic Club makes reasonable accommodation in the application process, if needed.

This application is current only for sixty (60) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.

PERSONAL INFORMATION *(Please print)*

Name: (Last)	(First)	(Middle)	Today's date:
Current address:			Day phone number:
City:	State:	Zip:	Mobile phone number:
Have you worked for us before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Email address:
If yes: (Dates)	(Dept)		
Are you authorized to work in the United States? (Federal law requires proof of identity and employment authorization for all new employees)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>For driving jobs only:</u> Do you have a valid driver's license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
License number:	State:	Expiration date:	
Are you a member or related to a member of the club?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, please explain:			

EMPLOYMENT DESIRED

Position applied for:	Date available for employment:	Wage or salary desired:
Which type of employment are you seeking? <input type="checkbox"/> Full time <input type="checkbox"/> Days only <input type="checkbox"/> Part time <input type="checkbox"/> Nights only <input type="checkbox"/> Full or part time <input type="checkbox"/> Days or nights	Specify hours available:	
	Are you able to work overtime?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How did you learn of this position? <input type="checkbox"/> Website (name):	<input type="checkbox"/> School	<input type="checkbox"/> Employment agency
<input type="checkbox"/> Other (please describe):	<input type="checkbox"/> Newspaper	
	<input type="checkbox"/> Referred by employee (name):	



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EMPLOYMENT EXPERIENCE

List below complete and accurate information regarding your last three employers, starting with your current or most recent one first. Please complete even if you attach a resumé.

1. Current/Most recent employer:		Dates employed:	
		(From)	(To)
Address:		<input type="checkbox"/> Full time	<input type="checkbox"/> Other (describe):
		<input type="checkbox"/> Part time	
City:	State:	Zip:	Reason for leaving:
Job title:		Rate of pay:	
		(Starting)	(Ending)
List the jobs you held, duties performed, skills used or learned, and advancements or promotions.			
Supervisor: (Name)		(Title)	(Phone)

2. Next previous employer:		Dates employed:	
		(From)	(To)
Address:		<input type="checkbox"/> Full time	<input type="checkbox"/> Other (describe):
		<input type="checkbox"/> Part time	
City:	State:	Zip:	Reason for leaving:
Job title:		Rate of pay:	
		(Starting)	(Ending)
List the jobs you held, duties performed, skills used or learned, and advancements or promotions.			
Supervisor: (Name)		(Title)	(Phone)

3. Next previous employer:		Dates employed:	
		(From)	(To)
Address:		<input type="checkbox"/> Full time	<input type="checkbox"/> Other (describe):
		<input type="checkbox"/> Part time	
City:	State:	Zip:	Reason for leaving:
Job title:		Rate of pay:	
		(Starting)	(Ending)
List the jobs you held, duties performed, skills used or learned, and advancements or promotions.			
Supervisor: (Name)		(Title)	(Phone)



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4. Next previous employer:		Dates employed: (From) _____ (To) _____	
Address:		<input type="checkbox"/> Full time	<input type="checkbox"/> Other (describe):
		<input type="checkbox"/> Part time	
City:	State:	Zip:	Reason for leaving:
Job title:		Rate of pay: (Starting) _____ (Ending) _____	
List the jobs you held, duties performed, skills used or learned, and advancements or promotions.			
Supervisor: (Name)		(Title)	(Phone)

EDUCATION AND TRAINING

Please list all education and training relevant to the position applied for (high school, college, trade school, etc.).

School:	# of years completed:	Subjects studied:
Location:		Degrees earned:
School:	# of years completed:	Subjects studied:
Location:		Degrees earned:
School:	# of years completed:	Subjects studied:
Location:		Degrees earned:
List job related skills relevant to the position applied for:		

IN YOUR OWN WORDS

Why do you want to work for the Multnomah Athletic Club?



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AUTHORIZATION

This employment application is used to notify me that the nature and scope of an investigation could include such general identification information, such as residence verification and information concerning my employment, education, general reputation, character, personal characteristics, and habits. I understand that such information may be developed through personal interviews with third parties such as family members, neighbors, friends, associates, former employers, educational institutions, custodians of official records or other sources. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records, and I also release Multnomah Athletic Club for its role in conducting the investigation described above.

I authorize Multnomah Athletic Club to release to any person, firm, entity or organization with which I may seek employment in the future, any truthful information concerning my work experience with Multnomah Athletic Club. I hereby release and hold Multnomah Athletic Club harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand that any job offer that may be extended to me is contingent upon the successful completion of a drug test, as described in Multnomah Athletic Club's drug and alcohol policy..

I understand that in order to work for Multnomah Athletic Club I must be authorized to work in the United States. I understand that an offer of employment must originate from a representative of the Human Resource office.

I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without omissions, and understand that omissions and/or false statements discovered during the application process shall be grounds for rejection of the application and, if employed, omissions and/or false statements in this application or during any interviews may result in discharge. I understand and acknowledge that, if hired, my employment is for no definite period and either Multnomah athletic Club or I may terminate our relationship at will at any time, without notice or any reason, and that this employment application does not constitute an employment contract. I have had an opportunity to have my questions about this statement's content and intent answered and understand its terms.

Date: _____

Signature of Applicant: _____