

# LA JOLLA BEACH & TENNIS CLUB, INC.



All qualified applicants will receive consideration for employment without regard to the qualified applicant's race, color, religion, gender, age, national origin, marital status, disability or any other basis prohibited by law.

Position(s) Applied For	Date of Application
How Did You Learn About Us? Please Name Source	
<input type="checkbox"/> Ad/Newspaper <input type="checkbox"/> Employee Referral (Name) <input type="checkbox"/> Member/Guest	<input type="checkbox"/> Walk-In <input type="checkbox"/> Agency/School <input type="checkbox"/> Other

Last Name	First Name	Middle Name
Street Address		City
		State
		Zip
Home Phone	Mobile Phone	Email Address
		Social Security Number

If you are offered employment, you must have valid authorization to work in the United States (U.S. Citizen, U.S. National, lawful permanent resident or alien authorized to work in the U.S.).

Can you provide such authorization if offered employment?  Yes  No

Are you under 18 years of age?  Yes  No

If you are under 18 years of age, can you, after hire, submit proof of your eligibility of work?  Yes  No

Have you ever been employed by this company?  Yes  No If yes, list date(s) \_\_\_\_\_

Have you ever applied here before?  Yes  No If yes, list date(s) \_\_\_\_\_

Are you currently employed?  Yes  No May we contact your present employer?  Yes  No

Are you available to work  Full Time  Part Time  Seasonal/Temporary  On Call

On what date would you be available for work? \_\_\_\_\_

Wage/Salary Desired \_\_\_\_\_

Can you perform the essential functions of the job for which you are applying, as described in the applicable job description, with or without reasonable accommodation?  Yes  No

Have you ever been convicted of a felony?  Yes  No

If yes, please explain \_\_\_\_\_

(This conviction will not necessarily disqualify an applicant from employment.)

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

# EDUCATION

SCHOOL	NAME AND LOCATION OF SCHOOL	TYPE OF STUDIES PURSUED	DEGREE OR DIPLOMA
College			
Business School			
High School			
Other			

## WORK AVAILABILITY

Check this box if you are available all hours that the position you are applying for requires.

Write in hours you are available for work each day of the week. Most of our jobs require availability on weekends and holidays.

Sun: \_\_\_\_\_ Mon: \_\_\_\_\_

Tue: \_\_\_\_\_ Wed: \_\_\_\_\_

Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_

Sat: \_\_\_\_\_

If applying for seasonal employment, please indicate dates available:

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

## SPECIALIZED SKILLS

Check applicable skills and certifications:

**Microsoft Office:**  
 Word  Excel  Powerpoint  Publisher  
 Typing Speed (wpm) \_\_\_\_\_

**Operating Systems:**  
 Micros Point of Sale  
 Opera Property Management System

**Food Service Positions:**  
 County Health Food Handler Certification?  
 Yes  No Expires \_\_\_\_\_

Other related skills or certifications:  
 \_\_\_\_\_

## DESCRIPTION OF JOB-RELATED QUALITIES

*Describe any specialized job-related training, certificates, skills or qualities that would be applicable to desired position. Exclude names or terms which may reveal gender, race, religion, national origin, age or disability or other protected status.*

# WORK HISTORY

A complete work history is required below. Please include a resume if available.

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Phone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Your Job Title	Supervisor's Name				
Reason for Leaving					

2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Phone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Your Job Title	Supervisor's Name				
Reason for Leaving					

3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Phone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Your Job Title	Supervisor's Name				
Reason for Leaving					

4.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Phone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Your Job Title	Supervisor's Name				
Reason for Leaving					

# PERSONAL REFERENCES

List three references other than relatives and former employers (Name, relationship, email and phone number).

Name	Relationship	Email	Phone
Name	Relationship	Email	Phone
Name	Relationship	Email	Phone

Please read and sign applicant's statement on next page.

# APPLICANT'S STATEMENT

## APPLICANTS: Please read carefully before signing

By typing my name in the following box, I certify that the answers given by me to the foregoing questions and statements are true and correct without misstatements or omissions of any kind whatsoever.

I agree that the company shall not be liable in any respect if my employment is terminated because of falsity of statements, answers or omissions made by me in this application. I also authorize the companies, schools or persons named above to give any information regarding my employment, character of qualifications. I hereby release said companies, schools or persons from any and all liability for damages resulting from the disclosure of the information. I understand that any mis-leading or incorrect statements may render this application for employment void and, if employed, would be cause for my discharge. I understand that there is no express or implied contract of employment offered to me by the company by this application. If I am employed, I understand that my employment is at-will and that it may be terminated by me or by the company at any time, for any reason, with or without advance notice or cause. I further understand that as a condition of my employment, I will sign a written at-will employment and arbitration agreement. Finally, I understand that all company property must be returned and that any indebtedness which I owe to the company must be repaid at the time of my separation from employment.

All applicants considered qualified for this position will be required to submit to urinalysis for illegal drug/alcohol use prior to appointment.

This application when completed and signed becomes the property of La Jolla Beach and Tennis Club, Inc.

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Signature of Applicant (type in your name)

Date

Please save your completed application on your computer or device with your last name and the date as the file name. (i.e. Smith\_6.10.16.pdf). Email it to: [employment@ljbtc.com](mailto:employment@ljbtc.com). If applicable, please attach your resume to the email when you submit this application.

Clear Form

Print

This application for employment shall be considered active for a period not to exceed 90 days.  
Any applicant wishing to be considered beyond this time is asked to re-apply.