

**THE DUNES CLUB**  
**P O Box 749**  
**Narragansett Rhode Island 02882-0749**

**EMPLOYMENT APPLICATION**

PLEASE PRINT

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Email Address \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Home # \_\_\_\_\_

Position Wanted \_\_\_\_\_ Referred By \_\_\_\_\_

Available (be specific) From \_\_\_\_\_ To \_\_\_\_\_

If employed and you are under 18, can you furnish a work permit? Yes \_\_\_\_\_ No \_\_\_\_\_

Available to work Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Nights \_\_\_\_\_ Weekends \_\_\_\_\_

In case of accident notify: Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of The Dunes Club. At the time of hire, I will be required to present proper documents to establish my eligibility to work in the United States. Immigration and Naturalization Services Form I-9 outlines acceptable documents from which I may choose.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please complete reverse side.**

**FOR PERSONNEL DEPARTMENT USE ONLY**

Employed: Yes \_\_\_\_\_ No \_\_\_\_\_ Department \_\_\_\_\_

Job Title \_\_\_\_\_ Rate \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

**Education:**

Circle current grade or last year completed: 7 8 9 10 11 12 13 14 15 16

Name of current or last school attended \_\_\_\_\_

Address \_\_\_\_\_

Remarks: \_\_\_\_\_

**Employment Experience**

Start with your present or last job.

Employer \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_ Job Supervisor \_\_\_\_\_

Work Performed \_\_\_\_\_

Salary Start \_\_\_\_\_ Ending \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_ Job Supervisor \_\_\_\_\_

Work Performed \_\_\_\_\_

Salary Start \_\_\_\_\_ Ending \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_ Job Supervisor \_\_\_\_\_

Work Performed \_\_\_\_\_

Salary Start \_\_\_\_\_ Ending \_\_\_\_\_

Reason for leaving \_\_\_\_\_

If you are currently employed, may we contact your employer? Yes \_\_\_\_\_ No \_\_\_\_\_