



## The Reserve Vineyards and Golf Club Application for Employment

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

### PERSONAL INFORMATION

NAME \_\_\_\_\_ DATE: \_\_\_\_\_  
First Middle Last

### PRESENT ADDRESS

Street City State Zip

PRIMARY PHONE (CELL / HOME?) ARE YOU 18 YEARS OR OLDER? Yes  No

SECONDARY PHONE (HOME / CELL?) ARE YOU 21 YEARS OR OLDER? Yes  No

ARE YOU ELIGIBLE TO LEGALLY WORK IN THE UNITED STATES? Yes  No

### EMPLOYMENT DESIRED

POSITION DATE YOU CAN START SALARY DESIRED

ARE YOU EMPLOYED NOW? IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

HAVE YOU APPLIED TO THIS COMPANY BEFORE? WHERE? WHEN?

### REFERRED BY:

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

### GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:

DO YOU HAVE CURRENT CERTIFICATION FOR: FIRST AID / CPR / AED? Yes  No

SPECIAL SKILLS OR CERTIFICATIONS: (i.e. food handler's permit, OLCC server permit)

**EMPLOYMENT HISTORY:** (Please list, in the space below, your last three employers, starting with the last one first.)

DATE Month and Year	NAME AND ADDRESS OF EMPLOYER	POSITION	REASON FOR LEAVING
FROM TO			
FROM TO			
FROM TO			

Which of these jobs did you like best?

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What did you like most about this job?

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**REFERENCES:** Please provide the names of three work related individuals we may contact regarding your work history in the space provided below:

NAME	PHONE NUMBER	BUSINESS	YEARS ACQUAINTED

I certify that all the information submitted by me on this application is true and complete and I understand that if any false information, omissions or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to conform to the company's rules and regulations and I agree that my employment and compensation can be terminated, with or without cause, and with or without any notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

DATE:

SIGNATURE:

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**PLEASE DO NOT WRITE BELOW THIS LINE.**

INTERVIEWED BY:

DATE:

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COMMENTS:

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HIRE: Yes  No

POSITION:

DEPT:

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SALARY/WAGE:

DATE REPORTING TO WORK:

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APPROVED:

1.

2.

3.

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Supervisor / Manager

Department Head

General Manager