

Employment Application

JC Resorts LLC

NAME (Last)	(First)	(Middle)	DATE OF APPLICATION
ADDRESS (Street)	(City)	(State)	(Zip)
TELEPHONE #	AVAILABILITY		WAGE/SALARY DESIRED
	Full-Time <input type="checkbox"/>	Mornings <input type="checkbox"/>	
	Part-Time <input type="checkbox"/>	Afternoons <input type="checkbox"/>	
MESSAGE #	Seasonal <input type="checkbox"/>	Evenings <input type="checkbox"/>	
POSITION DESIRED Choice #1 Choice #2	Are you able and willing to work weekends and holidays? <input type="checkbox"/> Yes <input type="checkbox"/> No		If applying for seasonal work, during what period of time will you be available? From: To:
LOCATION APPLIED AT	Are you available to work overtime, if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Rancho Bernardo Inn <input type="checkbox"/>	If hired, on what date can you start work?		
Oaks North Golf Course <input type="checkbox"/>	How did you find out about us?		
Temecula Creek Inn <input type="checkbox"/>			
Surf & Sand Resort <input type="checkbox"/>			
Twin Oaks Golf Course <input type="checkbox"/>			
Encinitas Ranch Golf Course <input type="checkbox"/>			
Reidy Creek Golf Course <input type="checkbox"/>			
Arrowood Golf Course <input type="checkbox"/>			
Auld Course <input type="checkbox"/>			
Mt. Woodson Golf Club <input type="checkbox"/>			
Scripps Inn <input type="checkbox"/>			
Corporate Office <input type="checkbox"/>			
Other: <input type="checkbox"/>			
CHECK EXPERIENCE IN THE FOLLOWING			
CLERICAL	<input type="checkbox"/> Personnel	<input type="checkbox"/> Cook	<input type="checkbox"/> Housekeeping/Houseperson
<input type="checkbox"/> Accounting	<input type="checkbox"/> Typing	<input type="checkbox"/> Desk Clerk	<input type="checkbox"/> Inspector/Inspectress
<input type="checkbox"/> Accounts Payable	<input type="checkbox"/> Word Processor	<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Laundry
<input type="checkbox"/> Accounts Receivable	<input type="checkbox"/> Lotus/Windows	<input type="checkbox"/> Doorperson	<input type="checkbox"/> Night Cleaner
<input type="checkbox"/> Auditor		<input type="checkbox"/> Gardener	<input type="checkbox"/> Pantry
<input type="checkbox"/> Bookkeeper	HOTEL/FOOD & BEVERAGE	<input type="checkbox"/> Golf Cart Attendant	<input type="checkbox"/> Pool/Beach Attendant
<input type="checkbox"/> Cashier	<input type="checkbox"/> Banquet Houseperson	<input type="checkbox"/> Golf Pro Shop	<input type="checkbox"/> Pros (Tennis/Golf)
<input type="checkbox"/> Computer	<input type="checkbox"/> Banquet Server	<input type="checkbox"/> Golf Shop Attendant	<input type="checkbox"/> Purchasing
<input type="checkbox"/> Concierge	<input type="checkbox"/> Bartender	<input type="checkbox"/> Golf Course Maintenance	<input type="checkbox"/> Reservations
<input type="checkbox"/> Filing	<input type="checkbox"/> Busperson	<input type="checkbox"/> General Maintenance	<input type="checkbox"/> Room Service
<input type="checkbox"/> Payroll	<input type="checkbox"/> Catering	<input type="checkbox"/> Host/Hostess	<input type="checkbox"/> Sales
<input type="checkbox"/> PBX			<input type="checkbox"/> Sauce Cook
			<input type="checkbox"/> Security
			<input type="checkbox"/> Snack Bar
			<input type="checkbox"/> Sous Chef
			<input type="checkbox"/> Storeroom Clerk
			<input type="checkbox"/> Tennis Pro Shop
			<input type="checkbox"/> Valet Attendant
			<input type="checkbox"/> Wait Staff
			<input type="checkbox"/> Cocktail <input type="checkbox"/> Food
			<input type="checkbox"/> Other _____
Are there any other experiences, skills or qualifications you feel would aid in your work with JC Resorts LLC (the "Company")? Please list: _____			
PERSONAL INFORMATION			
Have you ever applied to or worked for JC Resorts LLC (or CJ Resorts) before? If yes, when?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any friends or relatives working for JC Resorts LLC? If yes, state name(s) and relationship			<input type="checkbox"/> Yes <input type="checkbox"/> No
Why are you applying for work at JC Resorts LLC?			
If hired, would you have a reliable means of transportation to and from work?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)			<input type="checkbox"/> Yes <input type="checkbox"/> No
If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? (Proof will be required in conformance with federal law if an employment offer is made.)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to perform the essential functions of the job for which you are applying? If no, describe the functions that cannot be performed.			<input type="checkbox"/> Yes <input type="checkbox"/> No

An Equal Opportunity Employer

Are you able to perform all duties of the job for which you are applying? Yes No
 If no, please describe the duties and functions you cannot perform. _____

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? (Convictions for marijuana-related offenses that are more than two years old need not be listed.) Yes No
 If yes, state nature of the crime(s), when and where convicted and disposition of the case. _____

(Note. No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

EDUCATION, TRAINING AND EXPERIENCE

School	Name and Address	Years Completed	Did you Graduate?	Degree or Diploma	Year Graduated
High School			Yes <input type="checkbox"/> No <input type="checkbox"/>		Leave Blank
College/ University			Yes <input type="checkbox"/> No <input type="checkbox"/>		
Vocation/ Business			Yes <input type="checkbox"/> No <input type="checkbox"/>		
Health Care			Yes <input type="checkbox"/> No <input type="checkbox"/>		
Other			Yes <input type="checkbox"/> No <input type="checkbox"/>		

Many of our customers do not speak English. Do you speak, write or understand any foreign languages? Yes No
 If yes, which language(s)? _____

EMPLOYMENT HISTORY

(List below all present and past employment starting with your most recent employer (last 10 years is sufficient))

From: _____ mo./yr.	Name and Address of Employer	Pay \$ _____ per _____	Name of Supervisor
		Position held?	
To: _____ mo./yr.	Phone #	Detailed reason for leaving employer?	
From: _____ mo./yr.	Name and Address of Employer	Pay \$ _____ per _____	Name of Supervisor
		Position held?	
To: _____ mo./yr.	Phone #	Detailed reason for leaving employer?	
From: _____ mo./yr.	Name and Address of Employer	Pay \$ _____ per _____	Name of Supervisor
		Position held?	
To: _____ mo./yr.	Phone #	Detailed reason for leaving employer?	
From: _____ mo./yr.	Name and Address of Employer	Pay \$ _____ per _____	Name of Supervisor
		Position held?	
To: _____ mo./yr.	Phone #	Detailed reason for leaving employer?	

From: _____ mo./yr.	Name and Address of Employer	Pay \$ _____ per _____	Name of Supervisor
To: _____ mo./yr.	Phone #	Position held? Detailed reason for leaving employer?	

MILITARY EXPERIENCE

Have you obtained any special skills or abilities as a result of service in the military? Yes No
 If so, describe: _____

If you are presently employed, may we contact your current employer? Yes No

Person to contact in the event of an emergency:
 Name, Address and Telephone No: _____

REFERENCES

(List below three persons who have first-hand knowledge of your work performance within the last three years.)

Name and Address	Occupation	Telephone Number	Number of Years Acquainted
Name and Address	Occupation	Telephone Number	Number of Years Acquainted
Name and Address	Occupation	Telephone Number	Number of Years Acquainted

APPLICANT CERTIFICATION, AUTHORIZATION AND UNDERSTANDING

(Please read and sign below)

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application (or have given the answers to _____ who wrote in my response, and I have confirmed all responses given). I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize JC Resorts LLC to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize my former employers to disclose to the Company any and all letters, reports and other information related to my work history and records, without providing me with prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigations or disclosure.

My signature below certifies that I understand that if I am extended an offer of employment by JC Resorts LLC, my employment is contingent upon: successful completion of a drug urine screen; satisfactory completion of a medical or psychological examination and/or inquiry (applicable for certain job classifications only); satisfactory results of the Company's background, credit and reference checks; and legally required proof of my identity and authorization to work in the United States.

I understand that nothing contained in the application or conveyed during any interview which may be granted is intended to create an employment contract between me and the Company. I understand that if I am employed, my employment with the Company will be "at will" which means that the terms and conditions of employment may be changed, with or without cause and with or without notice, including, but not limited to termination, demotion, promotion, transfer, compensation, benefits, duties and location of work. I further understand that my status as an at-will employee cannot be changed except through a written agreement signed by the President of the Company. I agree that this shall constitute a final and fully binding integrated agreement with respect to the at-will nature of my employment relationship and that there are no oral or collateral agreements regarding this issue.

Date: _____

Applicant's Signature: _____