Hyannis Yacht Club

490 Ocean Street Hyannis, MA 01945

Tel: 508-778-6100 - Fax: 508-778-6811

APPLICATION FOR EMPLOYMENT

Personal Information: Name____ Date Address_____Zip____ Cell #: _____ Home Phone: ____ Email address Position desired Hours/Shifts desired: (i.e. Nights, Weekends, Holidays, Days) Date Available _____ Available until the end of season (late October?)_____ Referred by (Newspaper, College posting, HYC employee name): Are you currently employed? _____ if yes, may we contact your employer? _____ Are you a student? _____ if yes, please name school and year of study_____ Experience: Please list relevant experience even if it is not the most recent employment data. If currently employed, please list current employer even if experience is not relevant. Employer Supervisor & # Position Reason for Leaving Reference: Please list three persons not related to you whom you have known at least one year. Name Phone Number Occupation Years Acquainted

In case of emergency notify:					
Address			Phone		
Physician			Phone		
Please read before signing	7°				
color, age, sex, religion or nation occupational qualification. In ac lie detector test as a condition of	nal origin, ancestry or hecordance with M.G.L. Temployment or continu	handicap of a qualif Chapter 249, Sec. I ued employment. No	ination in employment on any basis in ied handicapped individual unless bas 9B, Hyannis Yacht Club does not adm visible tattoos or body piercing in pub	inister or require a blic area.	
I hereby certify that all informatic cause for dismissal or refusal of e	on provided on this app employment whenever o	olication is true and discovered.	correct. I understand that any falsific	cation or omission is	
I authorize investigation of all stavolunteer work, experience and exwith any requests for information	ducation. I release Hy	eannis Yacht Club ai	rize disclosure of information about m nd its agents and employees from all li	y past employment, iability in connection	
and aimed in the Hyannie Yacht C	Club's employment appi annis Yacht Club repre	lication, personnel p esentatives in connec	all times an "at will" employee. I un policies or other written documents, no ction with my application for employm	or any orac	
Signature:	e: Date:				
For office use only: Please XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	e do not write belo	ow this line: xxxxxxxxxxxxx	xxxxxxxxxxxxxxxxx	xxxxxxxxxxx	
Date of Interview:	Interv	riewed by:			
New Hire: ()	Date Hired:				
Returning Employee: ()					
Termination Date:					
Starting Rate: \$() Hour () Salary					
Pay Increase From \$	to \$	Effective			
Position Change from		to	Effective		
Comments:					
Manager Signature	Date	Gen	eral Manager Signature	Date	