

# CANDLEWICK LAKE ASSOCIATION, INC.

## APPLICATION FOR EMPLOYMENT

### PRE-EMPLOYMENT QUESTIONNAIRE

*Candlewick Lake Association, Inc. is an equal opportunity employer and does not discriminate against otherwise qualified applicants based on race, color, creed, religion, national origin, citizenship status, ancestry, age, sex, marital status, sexual orientation, physical or mental disability or handicap, or military status.*

**DESIRED POSITION:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**PHONE: (CELL)** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **(HOME)** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Are you 18 years or older? Yes\_\_\_ No\_\_\_

Are you 21 years or older (if applying for Savannah Oaks or Public Safety)? Yes\_\_\_ No\_\_\_

Are you legally authorized to work in the U.S.? Yes\_\_\_ No\_\_\_

Are you available to work any shift? Yes\_\_\_ No\_\_\_

If not, please provide your availability: \_\_\_\_\_  
\_\_\_\_\_

Can you work overtime, including weekends? Yes\_\_\_ No\_\_\_

Date you can start: \_\_\_\_\_

Have you ever worked for our company before? Yes\_\_\_ No\_\_\_

Did someone refer you to this job? \_\_\_\_\_

Are you currently employed? Yes\_\_\_ No\_\_\_

If yes, may we call your present employer? Yes\_\_\_ No\_\_\_

Have you ever been terminated from employment or asked to resign? Yes\_\_\_ No\_\_\_

If yes, please provide company name and details: \_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

*Please include any education or training which you believe qualifies you for the position you are seeking.*

**High School**

Number of years completed (circle one): 1 2 3 4

Diploma: Yes\_\_\_ No\_\_\_ G.E.D.: Yes\_\_\_ No\_\_\_

School(s): \_\_\_\_\_

City, State: \_\_\_\_\_

**College and/or Vocational School:**

Number of years completed (circle one): 1 2 3 4

Major(s): \_\_\_\_\_

Degree(s) Earned: \_\_\_\_\_

School(s): \_\_\_\_\_

City, State: \_\_\_\_\_

**Other Training or Degrees:**

Course, Degree, or Certification Earned: \_\_\_\_\_

School(s): \_\_\_\_\_

City, State: \_\_\_\_\_

**Special Skills and Qualifications**

Please list and describe any job-related skills, qualifications and/or training that would enhance your ability to perform for the position you are applying for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**JOB HISTORY**

*Please list your most recent employer first, including Military Service.*

**Current or Most Recent Employer:** \_\_\_\_\_

Job Title: \_\_\_\_\_

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

City, State: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Description of work: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May We Contact Your Supervisor? Yes\_\_\_ No\_\_\_

Name of Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

**Previous Employer:** \_\_\_\_\_

Job Title: \_\_\_\_\_

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

City, State: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Description of work: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May We Contact Your Supervisor? Yes\_\_\_ No\_\_\_

Name of Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

**Previous Employer:** \_\_\_\_\_

Job Title: \_\_\_\_\_

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

City, State: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Description of work: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May We Contact Your Supervisor? Yes\_\_\_ No\_\_\_

Name of Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

*If you wish to describe any additional work experience, please include the above information for each position on a separate page and attach it with this application.*

**MILITARY SERVICE RECORD**

Were you in the U.S. Armed Forces? Yes\_\_\_ No\_\_\_

If yes, what branch? \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Total time in Service: \_\_\_\_\_

Highest rank achieved: \_\_\_\_\_

Type of discharge: Honorable\_\_\_ Dishonorable\_\_\_ Other\_\_\_

Are you in the military reserves? Yes\_\_\_ No\_\_\_

If yes, what branch? \_\_\_\_\_

How often do you have to report for duties? Weekly\_\_\_ Monthly\_\_\_ Other\_\_\_

If other, please explain: \_\_\_\_\_

**PLEASE EXPLAIN ANY GAPS IN WORK HISTORY:**

\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

*Please list references who are not related to you, who are familiar with your job performance.*

Professional References:

Name	Phone	Email Address
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Personal References:

Name	Phone	Email Address
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**AUTHORIZATION**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you all information concerning my previous employment and any pertinent information they may have, personal, or otherwise and release Candlewick Lake Association, Inc. from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I understand that drug screening and a background check is required and is a condition of employment.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Candlewick Lake Association to hire me. If I am hired, I understand that either Candlewick Lake Association or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Candlewick Lake Association has the authority to make any assurance to the contrary.

Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_  
*Please print your name above*

**This application for employment is good for 60 days only.  
Consideration for employment after 60 days requires a new application.**