

Long Beach Yacht Club Application for Employment

Date:

Personal Information:

Name (First, MI, Last)			Personal E-mail Address		
Current Street Address Address		City	State Zip		
Phone Number	Fax Number		Cellular Number	Other Number	
Have you ever been known by any other	name? No	Yes (spec	cify)		
No. Voc present the nece			ired to complete a Form I-9, Employ ssary documentation of your legal sta each Yacht Club ("LBYC" or "the Clu I.	atus on your first d	ay of employment

We partner with a third-party consumer reporting agency to perform thorough criminal background checks and facilitate drug and alcohol screening of candidates as a condition of employment. Any offer of employment will be extended contingent upon the candidate's cooperation with that reporting agency, upon a negative result on the drug and alcohol screen and upon our review and individualized evaluation of the resulting criminal background report, including consideration of the nature, gravity and recency of any offense(s), and the relationship of any offense(s) to the job sought. A criminal conviction will not necessarily disqualify a candidate from employment with the Club.

Employment Objective:

Position Desired	Date Available for Work	Compensation Required
Type of Employment Desired: Full-time Part-time (≤ 30 hours per week)	What days and hours are you available to work?	
Have you previously applied here? If so, when' No Yes	?	Were you offered employment? No Yes

Education and Training:

	Name of School	Location (City/State)	Degree or grade completed	Major	Minor
High School					
College(s)					
Graduate School(s)					
Other (e.g. Trade Schools)					

Specialized Skills and Knowledge:

Describe any specialized training, apprenticeship, certifications, achievements or skills you consider relevant to your ability to perform the job for which you are applying (i.e. computer languages or software applications; proficiency in speaking and writing foreign languages; relevant tools, machinery or equipment you are qualified to operate).

Former Employers: <u>Complete fully. We will not accept "see Resume."</u> Please Note: Candidates are not required to disclose salary history.

Are you employed now? Yes No If "yes," may we contact your present employer? Yes No

Please list current or most recent employment first:

Name of Employer		Street Address			
Job Title	Status Full Time Part Time	City, State & Zip	o Code		
From (month/year)	To (month/year)	Immediate Supe	ervisor	Supervisor's Current Telephone Number	Your Full Name While Employed
Your Job Duties		-	Fully Explai	n Your Reason for Leaving T	his Position

Name of Employer		Street Address			
Job Title	Status Full Time Part Time	City, State & Zi	p Code		
From (month/year)	To (month/year)	Immediate Sup	ervisor	Supervisor's Current Telephone Number	Your Full Name While Employed
Your Job Duties	1	1	Fully Explai	n Your Reason for Leaving Thi	s Position

Name of Employer	Street Address

Job Title	Status Full Time Part Time	City, State & Zip Code			
From (month/year)	To (month/year)	Immediate Supe	ervisor	Supervisor's Current Telephone Number	Your Full Name While Employed
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Name of Employer		Street Address			
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If additional space is needed to list former employers, please use the back page.

Professional References:

If you have not already done so above, please provide the names and current contact information of three people who have had supervisory responsibility for you and who will talk honestly with us regarding your contribution, performance and overall work record.

Name	Relevant Employer	Professional Relationship	Phone Number	Email Address

Additional Information:

Have you ever been disciplined or dismissed from employment as a result of an incident or incidents involving workplace harassment? No Yes (fully explain dates and details)
Have you ever been disciplined or dismissed from employment as a result of an incident or incidents involving workplace violence, fighting or bullying?
No Yes (fully explain dates and details)
Have you ever been discharged or had your employment terminated involuntarily for any reason?
No Yes (fully explain dates and details)
Have you ever been party to an employer's Nondisclosure Agreement, Confidentiality Agreement, Agreement on Confidential & Proprietary Information and Material, or other similar document?
No Yes (Please provide full copy or copies for our review)

Note to Applicants: DO NOT ANSWER THE FOLLOWING TWO QUESTIONS UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.					
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job for which you have applied? Yes No	Can you travel if this job requires it? Yes No				
Please tell us how you learned about the Club, or who referred you:					

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Advertisement	LBYC web site	Internet			
(specify)		(specify)			

Other (specify)

I understand and acknowledge the following:

- 1. I authorize investigation of all statements contained in this application and any supporting documents. I authorize LBYC and its agents, employees or other representatives to secure information about my experience from former employers, educational institutions, government agencies, or any references I have provided, and for those parties to provide information concerning my qualifications for employment. I hereby release all parties and persons from any and all for any damages that may result from furnishing such information to the company, as well as from the use or disclosure of such information by the company or any of its agents, employees or representatives. I specifically authorize investigation of my motor vehicle record, criminal record, and consumer credit history.
- 2. If I am offered employment, I will, as a condition of employment, submit to a drug & alcohol screen as directed by The Club.
- 3. If I am offered employment, I will, as a condition of employment, furnish proof of my identity, that I am over 18 years of age and that I have the legal right to reside and work in the United States.
- 4. If I am offered employment, I will, as a condition of employment, provide my original Social Security Card.
- 5. I understand that if I am employed, any false statement, misrepresentation or omission of facts on this application or on any documents relating to my candidacy or subsequent employment, regardless of when discovered to be false, may result in my dismissal.
- 6. I agree that, if I am offered employment, I will be required to conform to the rules and standards of the company.
- 7. I hereby understand and acknowledge that, unless otherwise defined by applicable law, if I am offered a position, it will be offered on condition that MY EMPLOYMENT WILL BE "AT-WILL" AND FOR NO DEFINITE PERIOD, THAT MY EMPLOYMENT MAY BE ENDED AT ANY TIME BY ME OR BY THE CLUB, FOR ANY REASON OR FOR NO REASON, WITH OR WITHOUT PRIOR NOTICE. I understand that, except for the General Manager of The Club, no person may alter or amend this agreement about my "at-will" status, and that the General Manager may do so only by written, signed document.
- 8. My signature below certifies that I have read, understand and agree to the foregoing and to the best of my knowledge and belief; the information on the application form is true and correct.

Signature

At Long Beach Yacht Club, our policy is to fill every position without regard to race, color, religion, ancestry, sex, sexual orientation, gender or gender identification or expression, marital status, registered domestic partner status, age, national origin, citizenship, ancestry, physical or mental disability, medical condition, pregnancy/childbirth or breastfeeding, genetic information, military or veteran status or any other consideration made unlawful by federal, state, or local laws. The Club is an equal opportunity employer and selects employees on the basis of ability, experience, training, and character.

Please note: The Club only accepts and considers applications for currently open positions, and only for a thirty (30) day period. If you wish to be considered after 30 days from the date of this application, please reapply for an open position.

Please use the accompanying extra page as necessary for listing additional employment. Please list more recent employment first.

Past Employment Addendum to the Application of

Please Note: Candidates are not required to disclose salary history.

Name of Employer		Street Address			
Job Title	Status Full Time Part Time	City, State & Zip Code			
From (month/year)	To (month/year)	Immediate Supervisor		Supervisor's Current Telephone Number	Your Full Name While Employed
Your Job Duties	•	:	Fully Explain	n Your Reason for Leaving Thi	s Position

Name of Employer		Street Address			
Job Title	Status Full Time Part Time	City, State & Zip Code			
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Your Job Duties		:	Fully Explain	n Your Reason for Leaving This	s Position

Name of Employer		Street Address			
Job Title	Status Full Time Part Time	City, State & Zip Code			
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Job Title	Status Full Time Part Time	City, State & Zip Code		
From (month/year)	To (month/year)	Immediate Supervisor	Supervisor's Current Telephone Number	Your Full Name While Employed

Your Job Duties	Fully Explain Your Reason for Leaving This Position