

An Equal Opportunity Employer

Please Print				
Date	Last Name	First Name	Middle	
Present Addre	SS			
No. & Street		City	State Zip	Code
Permanent Ado	dress (if different from prese	ent address)		
No. & Street		City	State Zip	Code
Business Phone	Home Phone	Email Address		
Employment I	Desired			
Position applyi	ing for:			
Personal Info	rmation			
How did you h	lear about our company and	I this job opening?		
Have you ever	applied to or worked for	The Sutter Club	before?	Yes No
lf yes, w	hen?			
Why are you a	pplying for work at	The Sutter Club	?	

If hired, would you have a reliable means of transportation to and from work? Yes No
Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?
If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.

Education, Training, and Experience

School	Name and Address			No. of Years Completed	Did you Graduate?	Degree or Diploma
High School					Yes No	
	Name					
	Address					
	City	State	Zip Code			
College/ University					Yes No	
University	Name					
	Address					
	City	State	Zip Code			

School	Name and Address			No. of Years Completed	Did you Graduate?	Degree or Diploma
Vocational/ Business	Name				Yes No	
	Address					
	City	State	Zip Code			
Health Care Training	Name				Yes No	
	Address					
	City	State	Zip Code			

Education, Training, and Experience - continued

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

Name of Employer			Phone Number			
Type of Business			Your Supervisor's Name			
Address & Street			City	State Zip Code		
Dates of Employment	: From	То				
Current Employer ?				Yes 🗌 No		
Your Position and Duties						
Reason for Leaving						
May we contact this empl	oyer for a reference	?		Yes No		

Name of Employer Type of Business			Phone Number Your Supervisor's Name		
Dates of Employment:	From	To			
Your Position and Duties					
Reason for Leaving					
May we contact this emp	loyer for a referen	ce?		Yes No	
Note: Attach additional pa	ge(s) if necessary.				

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

First Name Last Name			Phone Number	
Address & Street		City	State	Zip Code
Occupation		No. of Years Acquainted		
First Name	Last Name		Phone	Number
Address & Street		City	State	Zip Code
Occupation		No. of Years Acquainted		
First Name	Last Name		Phone	Number
Address & Street		City	State	Zip Code
Occupation		No. of Years Acquainted		

Please Read Carefully, Initial Each Paragraph and Sign Below

Initials 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. 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.

Initials I hereby authorize The Sutter Club to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me 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 investigation or disclosure.

- I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.
- In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Date

Applicant's Signature

