



SUN CITY LINCOLN HILLS
COMMUNITY ASSOCIATION

APPLICATION FOR EMPLOYMENT

**PLEASE PRINT ALL
INFORMATION
REQUESTED
EXCEPT SIGNATURE**

Manager's Use Only
Position:
Status:
Wage:
Initials:

GENERAL INFORMATION:

Last Name	First	M.I.	Date
Street Address	Apartment/Unit #		
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Employment Desired	F/T <input type="checkbox"/>	P/T <input type="checkbox"/>	Are you available to work nights & weekends? YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Do you have any relatives working for Sun City Lincoln Hills Community Association?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, state name and relationship

SKILLS:

Typing Skills	BEGINNER <input type="checkbox"/>	INTERMEDIATE <input type="checkbox"/>	ADVANCE <input type="checkbox"/>	Computer Skills	BEGINNER <input type="checkbox"/>	INTERMEDIATE <input type="checkbox"/>	ADVANCE <input type="checkbox"/>
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OTHER INFORMATION:

Do you have a valid Driver's License?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	What is your means of Transportation?
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If you are under 18 years of age, please specify your age: _____ (This information will be used only for child labor law purposes).

EDUCATION:

High School	Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
College	Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Other	Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE (COMPLETE ONLY IF YOU SERVED IN THE MILITARY)

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

REFERENCES (LIST TWO OTHER THAN RELATIVE OR PREVIOUS EMPLOYERS)

Name	Phone Number
Address	
Name	Phone Number
Address	

Have you ever been discharged or asked to resign from employment? Yes No

If yes, explain: _____

Did you receive any discipline in your last 12 months of active employment with your previous employer?

Yes No If yes, please explain: _____

Were you given a performance evaluation within the last 12 months of active employment? Yes No

If yes, what was the range of scores used and what was your score? _____

Have you signed any non-competition or non-solicitation agreement or any other kind of agreement with any other employer that might restrict you from working for the Company (you will be required to furnish a copy of the agreement if you are being considered for hire)?

Yes No

If yes, please explain: _____

PLEASE READ CAREFULLY
APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Sun City Lincoln Hills Community Association (hereinafter called "the Association"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Association practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Sun City Lincoln Hills Community Association, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned,. The relationship cannot be altered except by a written instrument signed by the Executive Director of the Association. Both the undersigned and Sun City Lincoln Hills Community Association may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Association may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Association permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Association from any liability as a result of such contact.

I also understand that (1) the Association has a drug and alcohol policy that provides for pre-employment testing (2) consent to and compliance with such policy is a condition of my employment.

I further understand that the Association may conduct pre-employment medical examinations for certain job classifications and that a conditional offer of employment may be withdrawn on the basis of the results of the medical examination.

[]Initials

Signature of applicant _____ Date: _____

This Association is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability and any other protected classifications by federal, state and local laws. We assure you that your opportunity for employment with this Association depends solely on your qualifications.

It is the philosophy of Sun City Lincoln Hills Community Association's Board of Directors that some key positions will not be filled by qualified individuals who are members and/or residents of the Association. The positions are any that have access to proprietary and confidential information about other members and/or residents and present a high disclosure risk that could be a liability to the Association. This philosophy is based on reasonable business justification. Any employee in a key position that may become a resident of Sun City Lincoln Hills must notify human resources upon knowledge and will be placed in another position, if available, or may be separated from employment with Sun City Lincoln Hills Community Association Inc.

Thank you for completing this application form and for your interest in our business.