



# HOLYOKE CANOE CLUB

## Application for Employment

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Applicants for employment are considered without regard to race, creed, color, religion, sex, sexual orientation, marital status, results of genetic testing, national origin, age, disability, status as a veteran, Vietnam Era Veteran, or being a member of the Reserves or National Guard. Also it is unlawful in Massachusetts to require a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subjected to criminal penalties and civil liabilities.

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(PLEASE PRINT)

Date of Application \_\_\_\_\_

Position(s) Applied for \_\_\_\_\_

Are you available to work  Full Time  Part Time

Date available to start work? \_\_\_\_\_ Date you will need to stop work? \_\_\_\_\_

Are there any days/times you are unavailable to work? \_\_\_\_\_

Are you a member or a relative of a member?  Yes  No If yes, who? \_\_\_\_\_

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Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you under 18?  Yes  No

If employed and you are under 18, can you furnish a work permit?  Yes  No

Have you ever been employed here before?  Yes  No

If yes, give date: \_\_\_\_\_

Have you ever worked for a seasonal club?  Yes  No

May we contact your current employer?  Yes  No

(Proof of authorization to work and of your identity will be required upon employment.)

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## Employment History

Start with your present or last job. Include military service assignments and any verified work performed on a volunteer basis. You may exclude organization names which indicate race, creed, color, religion, sex, sexual orientation, marital status, results of genetic testing, national origin, age, disability, status as a veteran, Vietnam Era Veteran, or being a member of the Reserves or National Guard.

Employer	Telephone	Work Performed
Address	City, State, Zip	
	Hourly Rate/Salary	
Job Title	Starting   Final	
Supervisor	Dates Employed	
Reason for Leaving	From   To	
May we contact this employer for a reference?	<input type="checkbox"/> Yes   <input type="checkbox"/> No	
Employer	Telephone	Work Performed
Address	City, State, Zip	
	Hourly Rate/Salary	
Job Title	Starting   Final	
Supervisor	Dates Employed	
Reason for Leaving	From   To	
May we contact this employer for a reference?	<input type="checkbox"/> Yes   <input type="checkbox"/> No	
Employer	Telephone	Work Performed
Address	City, State, Zip	
	Hourly Rate/Salary	
Job Title	Starting   Final	
Supervisor	Dates Employed	
Reason for Leaving	From   To	
May we contact this employer for a reference?	<input type="checkbox"/> Yes   <input type="checkbox"/> No	

What other experience or training have you had that may have prepared you for this position?

## Educational Background

	Name of School	City, State	Diploma Awarded	Degree/Major
<input type="checkbox"/> High School <input type="checkbox"/> GED			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress	
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress	
Vocational/ Other			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress	
Describe any non-employment experience such as school or volunteer activities that might strengthen your application:				

## References

Please list at least three character references that know you well and can attest to your abilities and suitability for Holyoke Canoe Club employment (*one reference must be a family member*).

Name: _____ Relationship: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____
E-mail: _____ Phone: _____ Alternate #: _____

Name: _____ Relationship: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____
E-mail: _____ Phone: _____ Alternate #: _____

Name: _____ Relationship: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____
E-mail: _____ Phone: _____ Alternate #: _____

## APPLICANT STATEMENT

It is my understanding that this employment application, or the granting of an oral interview, does not represent a contract of employment or promise of future benefits by this company/organization. **I understand and agree that if hired, my employment will be at-will in nature and may be terminated, with or without cause, at any time, by either my employer or myself. I also understand that this written statement supersedes any and all oral representations made by agents or representatives of this company/organization.**

**Initial** \_\_\_\_\_

I certify that the information on this application is true, completed and correct. I hereby authorize the investigation of my past employment, education and activities and I release from liability all persons, companies and corporations supplying such information. I understand that false answers, statements or significant omissions made by me on this form shall be sufficient cause for denial of employment or discharge.

**Initial** \_\_\_\_\_

I understand that the Holyoke Canoe Club has a zero tolerance standard for abuse and inappropriate behavior by staff members including harassment of any kind.

**Initial** \_\_\_\_\_

**I certify that I have read, fully understand and accept all terms of the foregoing applicant statement.**

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**Signature of Applicant**

**Date**

**Please send completed applications to:**

Holyoke Canoe Club  
PO Box 655  
Holyoke, MA 01040  
Attn: Jennifer Garbiel