HIRING INFORMATION FOR THE PORTAGE GOLF CLUB

EMPOLYEE INFORMATION

NAME:	
ADDRESS:	CITY:
PROVINCE:	POSTAL CODE:
DATE OF BIRTH:	SIN:
PHONE #: HOME:	CELL:
RETURNING EMPLOYEE: YES /	NO
STATUS: SINGLE / MARRIED	
NAME:	TIFIED IN CASE OF EMERGENCY
ADDRESS:	
	PHONE:
TO BE COMPLE	ETED BY HIRING MANAGER
DATE HIRED:	HOURLY WAGE:
POSITION:	DEPARTMENT:
APPROVED BY:	