

## Open Positions: Maintenance - Grounds Crew\*

**Job Title:** Grounds Crew (16+ w/drivers license, 18+ to operate machinery)

**General Job Description: Part-Time**

Grounds crew staff members have the primary duties to assist the superintendent in keeping the golf course & practice facilities up to standards.

**Major Duties & Responsibilities:**

- Operating equipment responsibly
- Arriving early in the morning to prepare the course for the day
- Working weekends
- Preparing bunkers, tees, greens, & fairways
- Organizing the maintenance building

**Staff Privileges: must work 2 weeks (1 pay period) before privileges apply**

- 50% off food while working
- Free golf, guests pay guest fee (tee times must be made through the golf shop, not online - certain days have very limited tee time availability)
- 1 large range bucket per day
- More information will be provided during the training process

\*Subject to change during season (2024)



**Application for Employment**  
*An Equal Opportunity Employer*

(Do not attach the job descriptions when submitting application) - **email scook@minesgc.com**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Best time to reach you? \_\_\_\_\_

Primary Email Address: \_\_\_\_\_

Position applied for: \_\_\_\_\_ Referral Source? \_\_\_\_\_

Are you applying for full-time, part-time or temporary work? \_\_\_\_\_

Date available: \_\_\_\_\_ What is your desired salary range? \_\_\_\_\_

Are you presently employed? \_\_\_\_\_ If yes, where? \_\_\_\_\_

May we contact you at work? \_\_\_\_\_ If yes, work number: \_\_\_\_\_

Are you legally eligible for employment in the U.S.? \_\_\_\_\_ Are you at least 18 years old? \_\_\_\_\_

Have you worked under a different name before? If yes, explain: \_\_\_\_\_

Have you ever been convicted of a crime? If yes, state the crime(s) and date(s): \_\_\_\_\_

Are any felony charges pending against you? (If yes, please explain.) \_\_\_\_\_

What other employment or sideline business do you have? \_\_\_\_\_

Would you want to continue if employed by us? \_\_\_\_\_

**Education**

<i>Name and Location</i>	<i>Years Completed</i>	<i>Diploma/Degree</i>	<i>GPA</i>
High School _____	1 2 3 4	_____	_____
Undergraduate School _____	1 2 3 4	_____	_____
Graduate/Professional School _____	1 2 3 4	_____	_____
Business or Trade School _____			

**References**

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Employment History:**

*List below past and present employers, starting with your most recent employer. Include any job related military service assignments. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. If you need additional space, please continue on a separate sheet of paper.*

Company Name and Address: \_\_\_\_\_

Position: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Ending Wage: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ May we contact him/her? \_\_\_\_\_

Dates Employed: \_\_\_\_\_ Reason(s) for leaving: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Company Name and Address: \_\_\_\_\_

Position: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Ending Wage: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ May we contact him/her? \_\_\_\_\_

Dates Employed: \_\_\_\_\_ Reason(s) for leaving: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

**Applicant Statement:**

I hereby affirm that the information provided in this application (and accompanying resume and other documents, if any) is true and complete. I also agree that any false information, misrepresentations, or omission—verbal or written—may disqualify me from further consideration for employment and may result in discipline or dismissal if discovered at a later date.

I authorize a thorough investigation of all statements and references contained in this application and of my employment history, including discipline and attendance records, and agree to cooperate in such investigation. I release from all liability and responsibility all persons, corporations and other entities requesting or supplying such information and waive any right to notice of such disclosure.

Should I receive a conditional offer of employment, I agree to submit to a physical and/or psychological medical examination. I further authorize any physician or entity conducting such medical examination to release the results of such examination to the Mines Golf Club. I also understand that if I have a protected disability that affects my ability to perform the essential functions of the job I seek, I may ask the Mines Golf Club to attempt to make a reasonable accommodation for it. I must let the Mines Golf Club know of my need for accommodation as soon as possible.

I give my consent for the Mines Golf Club through an authorized testing service of its choice, to collect blood, urine, hair, or saliva samples from me and to conduct any other necessary medical tests to determine the presence of alcohol, drugs, or controlled substances. Further, I give my consent for the release of the test results and other relevant medical information to authorized management for appropriate review. If I am accepted for employment by the Mines Golf Club, I consent to be tested in the above manner during my employment when, in the Company's judgment, such testing is appropriate, and I acknowledge that remaining free of illegal drug use and complying with the Company's substance abuse policy is a condition of my employment.

I understand that all employees of the Mines Golf Club are employed on an at will basis and are subject to termination at any time, with or without prior notice, discipline, or warning, for any or no reason. No person other than Managers of the Mines Golf Club have authority to offer employment for any specified period or to make any different agreement. No such agreement by the Managers will be enforceable unless it is in writing, pertains specifically to me, and is signed by the Managers. Without limiting the foregoing, I further understand that I am required to abide by all rules and regulations of the Mines Golf Club and to work the hours, days, and shifts (either day or night) scheduled by the management of the department where I am employed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_