



Niagara Tenpin Bowling Association

Association Manager Application

Please submit by May 15, 2012 to:
Charlotte Konkle
ckonkle@ntba.ca
www.ntba.com

NAME: _____
 STREET ADDRESS: _____
 CITY, PROVINCE: _____
 POSTAL CODE: _____
 PHONE #: DAY: _____ EVENING: _____
 EMAIL ADDRESS: _____

HAVE YOU EVER APPLIED AT THIS ASSOCIATION BEFORE?

NO: _____ YES: _____ IF YES, WHEN: _____

POSITION APPLYING FOR: ASSOCIATION MANAGER

SALARY EXPECTATIONS: _____ HOURS AVAILABLE: _____

WHEN CAN YOU START: _____

HOW WERE YOU REFERRED TO THIS ASSOCIATION?

NEWSLETTER: _____ WEBSITE: _____ OTHER: _____

PLEASE DESCRIBE PROCESSING SPEED, SOFTWARE KNOWLEDGE AND OFFICE EQUIPMENT EXPERIENCE:

PLEASE DESCRIBE OTHER OFFICE EXPERIENCE:

EDUCATION:

SCHOOL	NAME & LOCATION	NO. OF YEARS ATTENDED	MAJOR SUBJECTS	DIPLOMA/DEGREE REC'D
High School				
College				
Graduate				
Other (specify)				

TRAINING COURSES: List any relevant academic honours, awards, scholarships, professional organizations, volunteer activities, certificates, publications, licenses, or any other information your consider significant and relevant to employment at this association.

COURSE/SEMINAR	ORGANIZATION SPONSORING	CONTENT	DATE(S) ATTENDED

EMPLOYMENT HISTORY: List present or most recent employment and/or association positions first. Complete even if accompanied by a resume.

Employer/Association	Position Title	Start Date	End Date
Street Address		Salary	Hrs per wk
City, Province, Postal Code	Last Supervisor's Name	Phone #	May we contact?
Describe duties/responsibilities			Reason for Leaving
Employer/Association	Position Title	Start Date	End Date
Street Address		Salary	Hrs per wk
City, Province, Postal Code	Last Supervisor's Name	Phone #	May we contact?
Describe duties/responsibilities			Reason for leaving

References: List 3 persons other than personal friends or relatives who have knowledge of your bowling background or education.

NAME	MAILING ADDRESS	PHONE # (DAY)

PLEASE READ CAREFULLY BEFORE SIGNING THIS FORM

1. All information contained in this application is true to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be the cause for subsequent dismissal if I am hired.
2. I authorize this association to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favourable or unfavourable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to my employment or me.
3. Regardless of whether or not I become hired by this association, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at this association is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the association's, unless specifically provided otherwise in a written employment contract. I further understand that no association employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the association, and then only by means of a signed, written document.

APPLICANT'S SIGNATURE: _____

DATE: _____