

Date: _____

Name: _____ E-Mail: _____
Last First Middle Initial

Address: _____ Telephone # _____
Street Town State Zip Code

Do you have any physical condition, which may limit your ability to perform the particular job for which you are applying? _____; If yes, describe such condition _____

Education

What year in school are you attending at present: High School 1 2 3 4
College 1 2 3 4

Describe any training or education, which would relate to this position: _____

**** Lifeguards and Swim Instructors please attach copies of valid certificates ****

Are you over the age of eighteen? _____ If no, hire is subject to verification that you are of minimum age.

Positions Applied for _____ Would you work Full Time _____
Rate of Pay expected _____ Would you work Part Time _____
Specify days & hours if Part Time _____ Were you previously employed by us? _____
If yes, when? _____

List any work experience that would relate to this position

Name and Address of Company and Type of Business	From Mo. Yr.	To Mo. Yr.	Describe the work you did
_____			_____
_____			_____
_____			_____

Name and Address of Company and Type of Business	From Mo. Yr.	To Mo. Yr.	Describe the work you did
_____			_____
_____			_____
_____			_____

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered efficient cause for dismissal.

Signature of Applicant _____

FOR OFFICE USE ONLY	
Work	
Location _____	Rate _____
Position _____	Date _____