

## APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position applied for: \_\_\_\_\_ Date: \_\_\_\_\_

(Last Name) (First Name) (Middle Name)

Address City State Zip

Telephone Number(s) Birthdate

Social Security Number \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Have you ever filed an application with us before?  Yes  No      Are you currently employed?  Yes  No

Have you ever been employed with us before?  Yes  No      May we contact your current employer?  Yes  No

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

On what date would you be available for work? \_\_\_\_\_

On what date would you be ending employment for us? \_\_\_\_\_

Are you available to work: Full Time or Part Time  
(circle one)

If Part Time, what reasons (sports, summer classes, other employment, etc.)

List reasons here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Are you currently certified in these areas?

Lifeguard  Yes  No

W.S.I.  Yes  No

First Responder  Yes  No

CPR -- Adult  Yes  No -- Child  Yes  No -- Infant  Yes  No

List other qualifications: \_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT EXPERIENCE:**

Start with your most current job.

1. Employer \_\_\_\_\_  
dates employed: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Job title \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

2. Employer \_\_\_\_\_  
dates employed: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Job title \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

3. Employer \_\_\_\_\_  
dates employed: from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Job title \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**APPLICANTS STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

In case of emergency please contact:

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

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

Phone: \_\_\_\_\_