Woodhaven Swim Club

Employment Application

**Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Home Phone** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you over the Age of 13?** **Yes** **No**

**EMPLOYMENT DESIRED (circle at least one):**

Pool Manager Lifeguard Concession Worker (Ages 13-14 years old only)

***Lifeguard Only*** – Indicate certifications by entering expiration dates for each certificate you hold:

Lifeguard \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CPR/First Aid\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WSI\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AVAILABILITY**:

***\*Please understand that ALL employees of Woodhaven (regardless of age), may have to work as late as midnight some nights depending on when the pool closes and the amount of work that must be completed. This is not negotiable and is part of the job requirements. \****

Indicate any days of the week or hours of the day you will **NOT** be available (noon to 9pm)

Day: Mon Tues Wed Thurs Fri Sat Sun

Hours: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Will you be employed elsewhere this summer which may impact your availability? \_\_\_\_\_\_\_\_\_\_\_\_\_

**EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Name of School** | **Last Year Completed** | **Did You Graduate?** | **Subjects Studied or Degree(s) Received** |
| Current School |  | 1 2 3 4 | Yes No |  |
| College |  | 1 2 3 4 | Yes No |  |
| Trade, Business, Correspondence School |  | 1 2 3 4 | Yes No |  |

**WORK EXPERIENCE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Month, Year | **Name and Address of Employer** | Position | Salary | **Reason for Leaving** |
| From  To |  |  |  |  |
| From  To |  |  |  |  |
| From  To |  |  |  |  |

**REFERENCES**

Please list three people, not related to you, who have known you at least one year

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Address | Business | **Years Acquainted** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**PHYSICAL RECORD**

Do you have any physical condition that may limit your ability to perform the job applied for (lifting,

allergies, long-term injury)?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Why do you want to work at Woodhaven and what qualities do you bring to the position?**

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**In case of emergency, please notify:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Address Phone

**I certify that all of the foregoing statements are true and correct to the best of my ability. I understand that misrepresentation or omission of facts is cause for dismissal.**

# Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**DO NOT WRITE BELOW THIS LINE**

Interviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Hire Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_