



# EMPLOYMENT APPLICATION

2010

## PERSONAL INFORMATION

DATE OF APPLICATION: \_\_\_\_\_

Name:

DOB: \_\_\_\_\_

SSN#: \_\_\_\_\_

\_\_\_\_\_  
Last                  First                  Middle

Address:

\_\_\_\_\_  
Street                                  (Apt)                                  City, State                                  Zip

Contact Information: (      )                                  (      )

\_\_\_\_\_  
Home Telephone                                  Mobile                                  Email

*How did you learn about our club?*

## POSITION APPLIED

Instructor     Lifeguard     Reception  
 Aquatic Manager     Other: \_\_\_\_\_  
Date you are available to start: \_\_\_\_\_  
Future Vacation Date: \_\_\_\_\_  
Are you currently employed? \_\_\_\_\_

**What shifts are you interested in working?**  
Permanent Part-Time \_\_\_\_ (more than 6 months)  
Temporary Part-Time \_\_\_\_ (Less than 3 months)  
Summer Only \_\_\_\_ Jun-Jul-Aug  
Others \_\_\_\_  
**Desired Pay Range:** \_\_\_\_\_ By Hour or Salary

Days & Hours Available	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	From:	From:	From:	From:	From:	From:	From:
	To:	To:	To:	To:	To:	To:	To:

## EDUCATION

	Name and Location	Graduate – Degree	Major / Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc...			
Other Education			

## OTHER INFORMATION

Have you ever applied to or worked for Calphin Aquatic Club/California Dolphin Swim School before?  
 Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

Do you have any friends or relatives working for Calphin Aquatic Club? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, please state name(s) and relationships:  
 Name \_\_\_\_\_ Relationship: \_\_\_\_\_

If hired, would you have reliable means of transportation to and from work? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you at least 18 years old? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you legally authorized to work in the United States with proof of your employment eligibility? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you physically able to perform the skills necessary to complete the duties of the job for which you are applying?  
 If no, please explain: \_\_\_\_\_

Have you been ever convicted of a criminal offense (felony)? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, please explain: \_\_\_\_\_

Have you ever been fired from a job or asked to resign? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, please explain: \_\_\_\_\_

## PREVIOUS EXPERIENCE (Please list beginning from most recent)

Dates Employed	Company Name	Location	Role/Title	Reason for Leaving

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position:

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## CERTIFICATIONS:

Lifeguard: Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_

CPR: Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_

First Aid: Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_

WST: Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_

WSI: Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_

Swim America: Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_

ASCA Level \_\_\_\_: Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_

\_\_\_\_\_ Year & Location of Certification \_\_\_\_\_ Current \_\_\_ expired \_\_\_