



APPLICATION FOR SWIMMING POOL EMPLOYMENT

Date: _____

PERSONAL INFORMATION

Last Name First Name MI

Address City State Zip

Telephone Number _____

If Minor, Parent's Name: _____

EMPLOYMENT DESIRED

Department

Manager: _____ Assistant Manager: _____

Life Guard: _____ Bath House: _____

Date You Can Start: _____ Duration of Employment: _____

Salary Desired: _____ Employed by City before: _____

Do You Have a Valid Driver's License: Yes/No

List Certifications if Applying for Lifeguard:

Do you have a current standard Red Cross First Aid Card? _____

Physical Record: _____

EMPLOYMENT EXPERIENCE

Date Month/Year	Name and Address of Employer	Salary (upon leaving)	Position	Reason for Leaving

REFERENCES List below three persons not related to you, whom you have known at least one year.

Name	Address	Number	Years Acquainted

It is understood that any misrepresentation by me in this application will be sufficient cause to void same or for dismissal from the "City" service at any future date if I have been employed.

Applicant Signature

Date