



Employment Application

Check One: () Management () Life Guard () Concessions
() Maintenance Staff () Adult Staff ___ concession ___ front window
Check One (if applicable): () Swim Team Coach () Lesson Instructor

Personal Information

Last Name: _____ First Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____

Employment Record

(List last 3 employers or other references. Specify employer, friend or family)

Name and Title: _____ Company: _____

Address: _____

Phone: _____

Name and Title: _____ Company: _____

Address: _____

Phone: _____

Name and Title: _____ Company: _____

Address: _____

Phone: _____

