

Northwest Swim Club

EMPLOYMENT APPLICATION

2018 Season

PERSONAL INFORMATION: (Please Print Clearly)

Name:		Date of Birth: / /	
Address:			
City		State:	Zip:
Phone: ()	Cell Phone: ()	Alt. Phone: ()	
Social Security No: - -		E-mail Address:	

Position Applying For:

**A COPY OF YOUR LIFEGUARD & CPR CERTIFICATION MUST ACCOMPANY THIS APPLICATION.
PLEASE LIST EXPIRATION DATES BELOW.**

Lifeguard Training Certification Expiration: / /	CPR Certification Expiration: / /
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EDUCATION:

High School	Location/City/State	Years Attended	Date Graduated	Degree
College	Location/City/State	Years Attended	Date Graduated	Degree
Trade School-Other	Location/City/State	Years Attended	Date Graduated	Degree

Summary of yours skills and qualifications:

WORK AVAILABILITY:

Date available to start work	Last day of availability	Dates of unavailability due to vacation/conflicts

PREVIOUS EMPLOYMENT: (most recent)

Company:		Position:	
Phone Number:		Supervisor:	
Dates of Employment:		Reason for Leaving:	

Company:		Position:	
Phone Number:		Supervisor:	
Dates of Employment:		Reason for Leaving:	

REFERENCES:

Please furnish the names and contact information of two people to whom you are not related and by whom you have not been employed.

Name:	Address:	Phone Number:
1.		
2.		

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal information, employment, educational, financial, or medical history and other related matters as may be necessary **for an employment decision. I hereby release employers, schools, or persons from all** liability in responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given on my application or interview(s) may result in my discharge.

Print Name (Applicant)	Date
Signature of Applicant:	

Parent Signature Required for Applicants Under 18 Years Old

Print Name (Parent)	Date
Signature of Parent:	

Return Application to:
 NWSC Board of Directors
 P.O. Box 4304
 Bethlehem, Pa 18018

Date Received: