

Mountain Springs Swim Club

Application for Employment



(DIRECTIONS: Fill out form and e-mail to mtspringspool@gmail.com along with any other relevant information or your resume. **Include** copies of applicable certifications earned; *HEADS UP Concussion Training Certificate, Current Lifeguard Training/Safety Training, CPR/AED, Standard First Aid certification; USAS Coaching Certification/ASCA Level 2 (or higher), Water Safety Instructor Certification.*) Training is available. Questions? mtspringspool@gmail.com

NUMBER EACH POSITION FOR WHICH YOU ARE APPLYING BY PRIORITY OF INTEREST. (MARK YOUR FIRST CHOICE WITH '1', SECOND CHOICE WITH '2', ETC. IF APPLICABLE.)

___ Pool Manager		___ Lifeguard	
___ Assistant Pool Manager		___ Lifeguard (substitute)	
Last Name	First	M.I.	Birth date
Street Address			Apartment #
City		State	ZIP
Phone		E-mail Address	
Mobile Phone		Social Security No.	
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for Mt. Springs Swim Club?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION

High School	Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
College	Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Other	Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

REFERENCES

Full Name	Relationship
Company	Phone
Address & e-mail	
Full Name	Relationship
Company	Phone
Address & e-mail	
Full Name	Relationship
Company	Phone
Address & e-mail	

EXPERIENCE

Organization	Phone	
Supervisor	Email	
Job Title	Starting Salary/hourly \$ rate	Ending Salary/hourly \$ rate
Responsibilities		

From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Organization		Phone	
Supervisor		Email	
Job Title	Starting Salary/hourly rate	\$	Ending Salary/hourly rate
Responsibilities			

From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Organization		Phone	
Supervisor		Email	
Job Title	Starting Salary/hourly rate	\$	Ending Salary/hourly rate
Responsibilities			

From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

1. Earliest date you will be available to work:
2. Last date you will be available to work:
3. How many hours a week are you willing to work?
4. Are you available to work any weekends in September?
5. List and explain dates, days & times you will not be able to work this summer.

6. List other activities you will be involved with during this summer.

7. What do you consider to be the primary responsibilities of the position for which you are applying?

8. Have you ever had experience in construction, landscaping, maintenance (pool or otherwise), childcare, swimming instruction, Please provide details.

COURSE	Date Taken	Place Taken	Instructor	Expiration Date
ARC Lifeguard Training				
ARC Standard First Aid				
ARC Adult CPR/AED				
ARC WSI				
ARC Lifeguard Instructor				
Certified Pool Operator				
Heads UP concussion Training				
Other				

Copies of all certificates must accompany this application. If not yet completed or expired, copies must be provided prior to the first day of work.

DISCLAIMER AND SIGNATURE

By my signature (digital or handwritten) below, I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand the minimum certification requirements for the job and will always maintain current certifications on file with the club.

I understand the appropriate job descriptions and responsibilities (reference Mt. Springs Swim Club Operations Handbook on the webpage).

I understand the member/visitor safety, prevention of accidents, cleanliness, and a professional and positive atmosphere at Mt. Springs Pool is paramount.

I have read and understand and will enforce the Mt. Springs Swim Club pool rules (reference Mt. Springs Swim Club Rules on the webpage).

I agree to participate in mandatory staff training sessions and staff meetings prior to the pool opening and throughout the pool season.

Signature

Date