



## North Springfield Swimming Club

P.O. Box 1209, Springfield, VA 22151

### 2012 Application for Employment

(please print)

Full Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Position Desired (circle): Guard Front Desk Other (state): \_\_\_\_\_

Other Positions that you would accept (circle): Guard Front Desk

Date Available to Start: \_\_\_\_\_ Last Date Available: \_\_\_\_\_

Type of Hours Sought (circle): Full-time Part-time Substitute

Hours Available (circle all that apply): Days Evenings Weekends

Is there any period from Memorial Day through Labor Day when you would not be available to work, such as for sports or vacation? If so, state dates unavailable: \_\_\_\_\_

Are you a citizen of the United States?: \_\_\_\_\_

If not are you legally allowed to work in the U.S.?: \_\_\_\_\_

Please list applicable certifications currently valid. Include a photocopy of each card/certification listed. If you do not have a current certification or your certification expires before September 4, 2012, please state your plans on getting/renewing your certification.

Certifications

Date Expired


Over

**Previous Employment** (Begin with current or most recent.)

Dates of Employment: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Positions Held: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? (circle)    yes                      no

Dates of Employment: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Positions Held: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? (circle)    yes                      no

Dates of Employment: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Positions Held: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? (circle)    yes                      no

If you have ever pleaded "guilty" "no contest" or have been convicted of a crime, state charge, court and date of conviction/plea: \_\_\_\_\_

I certify that my answers are true and complete to the best of my knowledge. I authorize North Springfield Swimming Club (NSSC) to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision, and authorize employers, schools and credit reporting agencies to release such information to NSSC. I release employers, schools or individuals from all liability when responding to inquiries in connection with my application. I understand that false or misleading information given on this application or interview(s) may result in termination of my employment with NSSC. If hired I agree to follow and enforce the rules of the NSSC, and to fully cooperate in the preservation of the property and health of NSSC and its patrons.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_