Carlisle Swim Club Job Application

P.O. BOX 500 CARLISLE, PA 17013

Application Information (please print)

Full name:					Age:	
-	Last	First		M.I.		
Address:					Phone:	
	Street address			Apt/Unit #		
					Email:	
	City		State	Zip Code		
Date of Birth:		Work Permit #:				
Position(s) desire	ed:					
 Attendant/Snach 	k Shack (age 14+)	•Lifeguard (a	age 15+)	•Swim Instruc	ctor (age 15+)	•Cook (age 16+)
Are you available	e for pre-season work?	Yes □	No □			
Can you work the entire summer-Memorial Day to Labor Day? (preference will be given to those who are willing/able to make a commitment to work consistent hours).			No 🗆	If no, please explain.		
Do you participat	te in a Spring Sport	Yes □	No □	If yes, what sport?		
Do you participat	te in a Fall Sport?	Yes □	No □	If yes, what sport?		
Previous Work Exp	cription of Aquatic Experi e		ourses and	certifications:		
Employer		Dates			Type of work	

Availability							
What days of the	week are you available to	Sunday Monday	Sunday Monday Tuesday Wednesday Thursday Friday Saturday (circle all that apply)				
How many hours per day are you available to work?							
	c time on any day that you ? Please explain.	would not be					
	ate of any vacations, sports n you would be UNAVAILAE						
References							
Name	Name Address			Phone Number/Email			
Disclaimer a	nd signature						
I certify that my ar	nswers are true and compl	ete to the best of r	ny knowledge.				
If this application my release.	leads to employment, I und	derstand that false	e or misleading info	rmation in my a	application or inter	view may result in	
Signature:				Da	ate:		
Parent Signature (if under the age of 18):							
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