



Summer Employment Application

RETURN APPLICATIONS TO:
CORINNE SWEET, Pool Staffing Coordinator
400 Doug Baker Blvd., Suite 100, Birmingham, AL 35242
(Located in Lee Branch next to Publix and Academy off of Hwy 280)
Fax to: (205)-991-9566
www.swimmingpoolservices.net

TODAY'S DATE: _____

PERSONAL INFORMATION

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Social Security #: _____ Driver's License # & State: _____

I am an U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis: Yes No

If applicable, please list your visa type, visa # and expiration: _____

Have you ever been convicted of a felony? Yes No If yes, please explain: _____

Are you at least 15 years old? Yes No If No, when will you be? _____

Emergency Contact Name (must be a Parent/Guardian if under 18): _____

Relationship: _____ Email: _____

Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

POSITIONS

You are applying for the following (select at least one):

- Life Guard (15+) Pool Manager (18+) Swim Lesson Instructor (16+) Swim Team Coach (17+)
 Gate Attendant (15+) Pool Monitor (19+) Pool Cleaner (19+)

Date you can begin work: _____ Date you will need to quit: _____

Days & times you are available: _____

Willing to work: Weekends? Yes No Holidays? Yes No Nights? Yes No

Average hours you want per week: _____ Are you a returning SPS employee? Yes No

Are you interested in working at a certain facility? Yes: _____ No

Are you or your family a member of a community pool, country club, or management company?

Yes: _____ No

What major intersection are you close to? _____

We have locations all over both Shelby & Jefferson County. How far are you willing to drive from home? _____ miles

How did you hear about Swimming Pool Services' employment opportunities?

Parent Friend: _____ Newspaper: _____ School: _____

Facebook Online or Our website Unemployment Office Other: _____

SKILLS & CERTIFICATIONS

Please check if you have any of the certifications below:

- Life Guarding C.P.R. for the Professional Rescuer First Aid A.E.D. Scuba
 O₂ Administration Water Safety Certified Pool Operator Life Guard Training Instructor
 Other relevant certifications: _____

Please list any other skills which you feel are relevant to the position(s) for which you are applying: _____

What interests you the most about the position(s) you are applying for or about our company? _____

EDUCATION

High School

Name: _____ City & State: _____

Did you graduate? Yes, year: _____ No Not yet, I will: _____ GPA: _____

Attended from _____ to _____ . Degree: _____

Special honors or awards: _____

Technical or Vocational School

Name: _____ City & State: _____

Did you graduate? Yes, year: _____ No Not yet, I will: _____ GPA: _____

Attended from _____ to _____ . Degree: _____

Special honors or awards: _____

College

Name: _____ City & State: _____

Did you graduate? Yes, year: _____ No Not yet, I will: _____ GPA: _____

Attended from _____ to _____ . Degree: _____

Special honors or awards: _____

EMPLOYMENT HISTORY

PRESENT OR MOST RECENT EMPLOYER

Company Name: _____

Address: _____

Your Position: _____ Dates Worked: _____ to _____

Duties: _____

Salary: _____ Reason(s) for leaving: _____

Supervisor: _____ Title: _____

Supervisor's Phone: _____ May we contact s/he? Yes No

PRIOR EMPLOYER

Company Name: _____

Address: _____

Your Position: _____ Dates Worked: _____ to _____

Duties: _____

Salary: _____ Reason(s) for leaving: _____

Supervisor: _____ Title: _____

Supervisor's Phone: _____ May we contact s/he? Yes No

PRIOR EMPLOYER

Company Name: _____

Address: _____

Your Position: _____ Dates Worked: _____ to _____

Duties: _____

Salary: _____ Reason(s) for leaving: _____

Supervisor: _____ Title: _____

Supervisor's Phone: _____ May we contact s/he? Yes No

REFERENCES

Please list three adults (not family members or previous supervisors) who have knowledge of your character.

1. Name: _____ Phone Number: _____
Relationship: _____ Years Known: _____
2. Name: _____ Phone Number: _____
Relationship: _____ Years Known: _____
3. Name: _____ Phone Number: _____
Relationship: _____ Years Known: _____

Please list three friends that may be interested in working for Swimming Pool Services.

1. Name: _____ Phone Number: _____
2. Name: _____ Phone Number: _____
3. Name: _____ Phone Number: _____

I understand that my employment will be strictly summer employment, and I will not file for unemployment when my employment ends. Agree?: Yes No

I hereby certify that my answers and assertions set forth in this application are true & complete to the best of my knowledge. If I am employed, I understand that any false statements on this application shall be considered sufficient cause for my dismissal. I hereby authorize this company to investigate any aspect of my prior education, criminal record, employment history, listed references and issuing agencies of certifications.

Furthermore I understand that if I am hired, employment with this company is "at will," which means that either the company or I can terminate my employment for any reason not prohibited by state or federal law.

Applicant's Signature: _____ Date: _____

EMPLOYEE NAME: _____

For Swimming Pool Services Use Only

Date Completed: _____

Interview? Yes, date: _____ No

Notes: _____

Hired? Yes, date: _____ No

Position assigned: _____ Location assigned: _____

Document check:

License Social Security Card or Birth Certificate Certification Cards Voided Check

Application for Child Labor Work Permit W-4 I-9

Give copies of the following items to the new employee:

Orientation & In-Service Dates Form	Job Descriptions	Uniform Order Form
Swim Lesson Packet	Non-Compete Contract	Phone Number List
Rules for Assigned Pool	How to Clock In/Out	LGT/CPR Class Schedule
Meetings/In-Service Policy	Vacation Policy	Scheduling/Tardiness Policy