

Carolina Aquatic Team

APPLICATION FOR EMPLOYMENT

Carolina Aquatic Team is an equal opportunity employer and does not discriminate against applicants or employees on the basis of sex, race, color, religion, national origin, ancestry or age (40 years of age or older).
 In addition, Carolina Aquatic Team does not discriminate against qualified individuals with disabilities.

PLEASE PRINT

Personal

Full Name _____ Soc. Sec. No. _____

Address _____ Email _____

Telephone (H) _____ (W) _____ (C) _____

Position(s) applying for _____

How did you hear about us _____

Are you over the age of 18 _____ Date available to start _____

T-Shirt Size _____ Swim Suit Size (W) _____ (M) _____

Have you ever been convicted of a violation of the law other than a minor traffic violation? _____

If yes, please explain _____

Have you ever applied to work with us before? _____ If yes, when? _____

If hired, proof of your identity and employment eligibility in the United States must be established by appropriate documentation at the time you begin work at Carolina Aquatic Team.

Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9:30 A.M. - 3:00 P.M.							
3:00 P.M. - 8:00 P.M.							

Other Scheduling Concerns _____

Education

	Name and Address	Number of years completed	Graduate	Major or Course of Study
High School				
College				
Other (specify)				

Certifications (Expires) Lifeguarding _____ CPR _____ First Aid _____

CPO _____ WSI _____ USA Coaches _____ Other _____

U.S. Military Service

Branch _____

Highest Rank Achieved _____ Dates of Service _____

Duties _____

In Case of Emergency Notify:

Name _____ Telephone Number (H) _____ (C) _____
Address _____
Relationship _____

Employment History (most recent employment first)

Dates	Employer's Name and Address	Supervisor	Position (s) Held	Salary
From:				Starting:
To:				Ending
Reason For Leaving:				
Dates	Employer's Name and Address	Supervisor	Position (s) Held	Salary
From:				Starting:
To:				Ending:
Reason For Leaving:				
Dates	Employer's Name and Address	Supervisor	Position (s) Held	Salary
From:				Starting:
To:				Ending:
Reason For Leaving:				

References

Name _____ Phone Number _____ Relation _____
Name _____ Phone Number _____ Relation _____
Name _____ Phone Number _____ Relation _____

Other Experience or Qualifications _____

Certification and Authorization—*Please Read thoughtfully.*

I certify that all facts contained in this application are true and complete and acknowledge that Carolina Aquatic Team is relying on accuracy of the information provided. I authorize Carolina Aquatic Team to verify the accuracy of the information provided herein, and I authorize former employees, educational institutions and credit agencies to release information concerning me to Carolina Aquatic Team. I also authorize Hollow Rock to give references and provide information about me in response to inquiries subsequent to my employment or, if hired. I understand that falsification, misrepresentation or omission of requested facts may result in denial of employment, or if employed, may result in immediate dismissal. I understand and agree that, if hired; my employment will be for no definite period and may, regardless of the date of payment of wages, be terminated at any time without previous notice or without reason, at the will of either myself or Carolina Aquatic Team. I also understand and agree that no one has the authority to promise my job security or continued employment, except the CEO of the company in a formal written agreement signed by both of us.

(Signature of applicant)

(Date)