City of Plano Swimmers
Application for Employment

Legal Name

Last First M.I.

Mailing Address

Street Apt. City/State ZIP

Contact Information

Home Number Cell Number Email

Position Desired D.L. Number

Are you 18 years of age or older? Yes No

Are you legally allowed to work in the US and could you provide proof upon offer on employment? Yes No

Swimming Background

Coaching Experience

Team	Coaching Group	Head Coach	Years Coaching

Swimming Experience

Level	Team	Coach	Year of Experience
Age-Group			
High School			
College			
Swimming Awards			

Employment Record

Start with most recent employee (Submit Resume for additional employment information)

If you are currently employed may we contact your present employer Yes ☐ No ☐

Employment Dates	Company	Telephone	Position Held	Reason For Leaving

Education

Type of School	Name, City and State of School	Major	Did you Graduate?	Year
High School				
College				
Graduate School				
Other Training				

References

Name	Contact Information	Relationship	Years Known

Schedule Availability

Please Select

Full Time ☐

Part Time ☐

Please Indicate your hours of availability	
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

Specialized Training

First Aid	☐	Expiration Date	
Water Safety	☐	Expiration Date	
C.P.R.	☐	Expiration Date	
Background Check	☐	Expiration Date	

Other (please list)

Describe your professional career goals?

Have you ever been convicted , received deferred adjudication, or pled no contest to any criminal offense within the last 7 years or been released from prison for a criminal offense within the last 7 years? Yes ☐ No ☐

If yes, please provide information regarding the nature of the offense and the court of recourse (a conviction will not necessarily ban you from consideration for employment)

Do you want to advise us on your starting salary expectation? Yes ☐ No ☐ If Yes, From $ to $

Important (please read carefully): I certify that the information given by me to the City of Plano Swimmers Inc. (COPS) is true and complete to the best of my knowledge. I understand that if I am employed, the discovery that I gave false information may result in my immediate dismissal. I authorize COPS to solicit information regarding my character, general reputation, credit and financial history, previous employment information from third parties(including a consumer report from any investigative or credit agencies or bureaus of its choice) and to contact any and all references I have given on my application. I hereby release all parties and persons connected with such request for information from all liability and damages arising out of the furnishing of such information. If employed I release COPS from any liability for future references it may provide regarding my work history at the organization in consideration of my employment. I agree that my employment will be on an at will basis and that my employment can be terminated at any time with or without cause or notice at any time at the option of either COPS or myself.

Signature

Date