

## EMPLOYMENT APPLICATION

**IMPORTANT!!** - If you are not 16 years old by Apr 1 of the current year, you are required by law to have a completed Work Permit if hired. Information is available at [http://www.doli.virginia.gov/laborlaw/employment\\_certificate\\_instructions.html](http://www.doli.virginia.gov/laborlaw/employment_certificate_instructions.html).

We are taking applications for certified lifeguards who are also willing to work concessions.

### PERSONAL INFORMATION

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

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Email address: \_\_\_\_\_

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### EDUCATION

High School: \_\_\_\_\_ GPA: \_\_\_\_\_

Year Completed: 9<sup>th</sup>, 10<sup>th</sup>, 11<sup>th</sup>, 12<sup>th</sup>

College: \_\_\_\_\_ GPA: \_\_\_\_\_

Year Completed: 1 2 3 4 5 Major: \_\_\_\_\_

List extracurricular activities and sports you participate in at the high school or college you currently attend as well as any awards or honors you have received.

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### EMERGENCY CONTACT INFORMATION

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

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

Do you have a history of medical conditions? NO/YES - if yes, please explain:

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### PERSONAL REFERENCES (family members may not be used)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ How long have you known them: \_\_\_\_\_

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Will you be available to work Memorial Day weekend? Yes No  
 Will you be available to work the week of Fourth of July? Yes No  
 Will you be available to work the Labor Day weekend? Yes No

(Employment candidates **MUST** be available to work two of the three holidays)

Are there dates that you know now you will be unavailable to work between Memorial Day and Labor Day?  
 (vacation, church trip, camp, fall sport, etc.)

Date(s)	Why?
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you plan to work a second job during the summer? If so, what will those hours be (that would conflict with SYC work hours)

\_\_\_\_\_

\_\_\_\_\_

Our lifeguards set an example of physical fitness, team work and SYC spirit by swimming for the SYC swim team. If 18 or younger on June 1, of the current year will you be willing to swim for SYC? (Employees pay \$25 to swim rather than normal team fees.) (Please consider this question and your availability carefully before answering this question.) **Yes** or **No** or **19** or **older as of June 1.**

**CERTIFICATIONS**

Issued by

Expires

Lifeguard Training & First Aid: \_\_\_\_\_

CPR/AED for Professional Rescuer: \_\_\_\_\_

If you are not currently certified, please indicate the month you plan to be trained: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

By signing above and submitting this application, I acknowledge that any statements made on this application found to be false may immediately disqualify me from employment and/or result in my immediate termination from Colonial Heights Swim & Yacht Club. I also understand that I am applying for a seasonal position and that the term of employment shall be for the summer months only. Therefore, I agree that I will not file for unemployment benefits when the swim season ends. I understand that any information gathered from this application or by contacting people or companies listed on this application, shall be held in strict confidence by SYC and shall only be released upon my written consent.

Mail completed application to:  
 Clestelle Green, Manager, P O Box 305, Colonial Heights, VA 23834  
 Deadline is March 22 unless positions remain open after this date