



**Eagle Point Swim and Tennis, Inc.**  
**LIFEGUARD APPLICATION FOR SUMMER EMPLOYMENT**  
*An Equal Opportunity Employer*

**Note:** Please type or print your answers

**PERSONAL INFORMATION**

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First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Current Address:

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Street and Apt. # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Permanent Address (if different from above):

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Street and Apt. # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

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: \_\_\_\_\_

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Have you ever been convicted of a felony?     **Yes**                       **No**

If you answered yes, please explain:

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Have you ever served in the U.S. Military?     **Yes**                       **No**

**EMPLOYMENT HISTORY:**

**Present or Most Recent Employer**

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact?  **Yes**     **No**

Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

**Previous Employer**

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact?  Yes  No

Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES:**

Name	Phone Number	Relationship	Address

**EDUCATION**

**High School**

\_\_\_\_\_  
Name and Address

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_.

If you did not graduate, did you receive your GED?  Yes  No

Special honors or awards: \_\_\_\_\_

**College or University**

\_\_\_\_\_  
Name and Address

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_.

Degree: \_\_\_\_\_ Major: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

What hour/days are you willing to work? \_\_\_\_\_

Are you willing to submit to a drug screening  Yes  No

When would you be able to start? \_\_\_\_\_

Desired Wage: \_\_\_\_\_ per hour

Please list lifeguard certifications:

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Please note the following job requirements:

1. Applicants must provide their own transportation.
2. Positions require employees to work flexible hours to include weekends and holidays.

I hereby certify that my answers and assertions set forth in this application are true and 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 educational and employment history.

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.

Signature: \_\_\_\_\_ Date \_\_\_\_\_