



**APPLICATION FOR EMPLOYMENT
HILL FARM SWIM CLUB
APPLICATION DEADLINE FEBRUARY 1ST**

If you would like to apply to join the Hill Farm Swim Club Staff Team, please complete the application below.

- Be sure to write legibly.
- The application must be completed in full.
- Read and sign the last page of the application.

Date of Application:		
Position(s) applied for: (Please check all that apply)	<input type="checkbox"/> Lifeguard	<input type="checkbox"/> Water Ballet Director
	<input type="checkbox"/> Instructor (morning & evening)	<input type="checkbox"/> Assistant Water Ballet Director
	<input type="checkbox"/> Instructor morning lessons only	<input type="checkbox"/> Pool Attendant
	<input type="checkbox"/> Instructor evening lessons only	<input type="checkbox"/> Front Desk Staff
	<input type="checkbox"/> *Head Swim Coach	<input type="checkbox"/> Water Polo Instructor
	<input type="checkbox"/> *Assistant Swim Coach	<input type="checkbox"/> _____ 11 and up _____ 9-10 _____ 8 & Under
	<input type="checkbox"/> _____ Mini-Moo's	
	<input type="checkbox"/> *Lead 8 & Under Coach	
	<input type="checkbox"/> Water Aerobics Instructor	
	<input type="checkbox"/> *Head Dive Coach	
<input type="checkbox"/> *Assistant Dive Coach		
<input type="checkbox"/> Any position for which I am qualified		
*Swim and Dive Coaches will be expected to lifeguard and teach lessons		

PERSONAL INFORMATION									
Name: Last			First			Middle Initial			
Address: Number Street						City	State	Zip Code	
Telephone Number (s):			Home:						
(Please check preferred number)			Cell :						
Email Address: Please write one character per space below.									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you 18 years of age or older?							<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date of Birth / /									
If hired, can you provide verification of your legal right to work in the United States?							<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Have you ever filed an application with us before?							<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, give date(s) _____									
Have you ever been employed with us before?							<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, give date(s) _____									

Do you currently have any pending charges against you, or have you ever been convicted for, pleaded guilty or no contest to, been placed on probation, fined, imprisoned, or incarcerated, or paroled for any offense (e.g. felony, misdemeanor, ordinance violation, forfeiture), other than minor traffic violations? _____ Yes _____ No

If your answer is yes, please explain the circumstances for each charge or offense:
Please note: Disclosure is required, but a pending charge or conviction will not automatically bar you from employment. Failure to disclose may result in an offer of employment being withdrawn, or employment to be terminated, whichever is applicable

EMPLOYMENT INFORMATION

Check all available days/hours that you will be able to regularly commit to:

SUNDAY- 11:00 am-9:00 pm	MONDAY- 5:45 am-9:00 pm	TUESDAY- 5:45 am-9:00 pm	WEDNESDAY- 5:45 am-10:00 pm	THURSDAY- 5:45 am-9:00 pm	FRIDAY- 5:45 am-9:00pm	SATURDAY- 10:00am-9:00 pm
_____ 11-2 pm	_____ 5:45-8 am	_____ 5:45-8 am	_____ 5:45-8 am	_____ 5:45-8 am	_____ 5:45-8 am	_____ 10-2 pm
_____ 2-5 pm	_____ 8-1	_____ 8-1	_____ 8-1	_____ 8-1	_____ 8-1	_____ 2-5 pm
_____ 5-9 pm	_____ 1-5	_____ 1-5	_____ 1-5	_____ 1-5	_____ 1-5	_____ 5-9 pm
	_____ 5-9 pm	_____ 5-9 pm	_____ 5-10 pm	_____ 5-9 pm	_____ 5-9 pm	_____ 5-9 pm

Preferred number of hours per week: _____ 15-20 hours _____ 21-30 hours _____ 31-40 hours

The summer pool season is from Memorial Day Weekend to Labor Day Weekend. Please write dates and reasons you would be unavailable to work during the pool season.

Why are you interested in working at Hill Farm Swim Club?

EDUCATION & TRAINING

	Name of School	Course of Study/Major	Years Completed	Diploma/Degree
_____ High School				
_____ GED				
_____ College				
_____ Graduate School				
_____ Vocational/Other				

PRESENT YEAR IN SCHOOL: High School 9th 10th 11th 12th
(At time of application) College Fresh Soph. Jr. Sr. 5th

SPECIALIZED TRAINING AND CERTIFICATIONS

Total Lesson Instructor Experience (years or seasons):

Total Guarding Experience (years or seasons):

Total Coaching Experience (years or seasons):

WSI YES NO	Lifeguard Exp. Date (MM/YY)	CPR Exp. Date (MM/YY)	First Aid Exp. Date (MM/YY)
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If certifications are expired, will you be renewing them before the upcoming Memorial Day Weekend?

_____ YES _____ NO _____ N/A

Please list any additional activities, certifications, awards, experiences, or any other information, which you believe would be helpful in the review of your application.

EMPLOYMENT HISTORY

List all previous employment during the past seven years, starting with the most recent. Employers may be contacted.

Employer: Telephone: Address: Job title: Immediate Supervisor and Title: Reason for leaving:	Dates Employed From: ____/____ to ____/____	Summarize the nature of the work performed and job responsibilities:
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What other business experience, personal experience or training have you had that may have prepared you for this position?

PERSONAL REFERENCES

1. Name: _____ Phone Number: _____

2. Name: _____ Phone Number: _____

APPLICATION ACKNOWLEDGMENT & AUTHORIZATION

Please read all statements and sign below:

I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in this application or any other document submitted in connection with Hill Farm Swim Club employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

If I am employed by Hill Farm Swim Club I understand that my employment can be terminated, with or without cause and with or without notice, at any time at the option of Hill Farm Swim Club or myself.

If hired, I agree to abide by Hill Farm Swim Club policies and rules at all times. I acknowledge that I have read the above statements and understand them.

Signature _____ Date: _____

APPLICATION SUBMISSION

Please return your completed application by the deadline date to:

Janna Casey
6302 Offshore Dr.
Madison, WI 53705
(608) 279-1963

or jlrichter2002@yahoo.com