



**EMPLOYMENT APPLICATION
WORTHINGTON POOLS**

Date Rec'd:

Rec'd By:

Personal Information:

Name: _____ Soc. Sec. No.: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ () Home () Cell Email: _____

Preferred Method of Communication: () Call () Text () Email Date Of Birth: ___/___/___

Have you been convicted of a crime within the last 7 years? ___ Yes ___ No

Have you had your driver's license revoked within the last 7 years? ___ Yes ___ No

If you answered yes to any of the above questions, please explain fully below

Position Applying For: _____

Summer Non-Summer (Fall/Winter/Spring) All Year

Certification Expiration Dates (if applicable):

LG/CPR/AED/ 1st Aid _____ LGI _____ WSI _____ AFO/CPO _____

Education:

High School _____ Location _____

Years Attended _____ Date Graduated _____

College _____ Location _____

Years Attended _____ Date Graduated _____ Degree _____

College _____ Location _____

Years Attended _____ Date Graduated _____ Degree _____

Summarize your special skills or qualifications:

Work Availability:

Date Available to Start Work : _____ Probable Last Day Available to Work: _____

Vacation Dates or Other Conflicts to Your Schedule Between the Above Dates:

Previous Employment: (most recent)

Firm _____	Position _____
Phone _____	Supervisor _____
Dates of Employment _____	Reason for Leaving _____
Firm _____	Position _____
Phone _____	Supervisor _____
Dates of Employment _____	Reason for Leaving _____

References:

Please furnish the names and contact information of two people to whom you are not related and by whom you have not been employed

Name _____	Name _____
Address _____	Address _____
_____	_____
Phone _____	Phone _____

I certify that my answers are true and complete to the best of my knowledge. I authorize Swiminc to use my personal information, including my Social Security number, to make such investigations and inquiries of my personal, employment, educational, and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application. In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in my discharge. I understand that if I am at least 18 years old, I will be subject to a background check for criminal and unlawful activity. This background check will be conducted using my social security number. Before any adverse action is taken against me based on the results of the background check, I understand that I am entitled to receive a copy of the background check report as well as a copy of my rights as outlined in the Federal Fair Credit Reporting Act.

Signature of Applicant: _____ Date: _____

Signature of Parent or Guardian (if under 18): _____

Return to:

Steve Hawkins at steve.hawkins@worthingtonpools.com or,
The Worthington Pools, 400 W. Granville Rd., Worthington OH 43085 or, Fax 614-885-4833