SwimWest Swim School

Employment Application

West Madison Location: 1001 Deming Way Madison, WI Fitchburg location: 6220 Nesbitt Road Fitchburg, WI www.swimwest.com



APPLICANT INFORMATION													
Full Name Toda									ay's Date				
Street Address, City, Zip													
Home Phone	Cell Ph	none	Preferred Phone Home Cell Either										
E-mail Address				Date of Birth									
What positions are you interested in? (circle all that apply) Front Desk / Swim Instructor / Lifeguard (must be lifeguard certified)													
When are you available to work? (circle all that apply) Winter / Spring / Summer / Fall													
Please indicate your available starting and ending times for each day of the week													
Availability	Monday	Tues	day	Wednesday	Thursday	Frida	ay	Saturday		S	unday		
Circle your	8:30am – Noon	8:30am – Noon		8:30am – Noon	8:30am – Noon	8:30am – Noon		8:00am – Noon		Noon – 4pm			
approximate availability	Noon – 4pm	Noon – 4pm		Noon – 4pm	Noon – 4pm	Noon – 4pm		Noon – 5pm		1pm-6pm			
	4pm-8pm	4pm-8pm		4pm-8pm	4pm-8pm	4pm-8pm							
Does your availability change over the year? If so, how?													
How many hours per week would you like to work? Minimum: Maximum:													
When are you available to begin?													
Which location would you prefer to work at? West Madison / Fitchburg / Either													
How did you learn about SwimWest or this job opening?													
Are you a citizen of the United States?			YES 🗌	NO 🗆	If no, are you auth	are you authorized to work in the U.S.? YES			NO 🗌				
Have you ever worked for SwimWest?			YES NO If so, when?			ii							
Have you ever been convicted of a felony? YES NO I If yes, explain													
Do you give SwimWest permission to do a fingerprint background check and perform a drug test? YES NO									NO 🗌				
EXPERIENCE													
Are you or have y	ou ever been cer	tified in an	y of thes	se categories?									
	Certifications Certifying Institution				ution	Current or Expired?				Expiration date			
	CPR/First Aid												
WSI: Water Safety Instructor													
Lifeguard													
Do you have any Swim Teaching or Lifeguarding Experience?													
Approximate Dates of Teaching or Lifeguarding Experience			Exper	ion of Teachir r ience A, Rec Center, P	(In	Levels Taught (Infant, Beginner, Intermediate, Team, Adult, Special Needs)							

EDUCATION											
Name of High School		City, State				Graduation Year					
Name of College or University		City, State		Major		Graduation Year					
Other		City, State		Field of Study		Graduation Year					
REFERENCES											
Please list three professional references that are not listed under employment											
Full Name				Relationship							
Company				Phone							
Address											
Full Name				Relationship							
Company				Phone							
Address											
Full Name				Relationship							
Company				Phone							
Address											
PREVIOUS EMPLOYMENT											
Company				Phone							
Address				Supervisor							
Job Title			Starting Salary	\$	Ending Salar	y \$					
Responsibilities											
From	rom To Reason for Leaving										
May we contact your previous supervisor for a reference? YES NO											
Company				Phone							
Address				Supervisor							
Job Title			Starting Salary	\$	Ending Salar	y \$					
Responsibilities											
From	То		Reason for Leavi	ng							
May we contact your previous supervisor for a reference? YES NO											
Company Phone											
Address				Supervisor							
Job Title			Starting Salary	\$	Ending Salar	y \$					
Responsibilities											
From To Reason for Leaving											
May we contact your previous supervisor for a reference? YES NO											

APPLICANT QUESTIONS

What interests you about working at SwimWest?

What experiences or qualities do you have that would make you a good staff member at SwimWest Swim School?

Are you working or attending school right now? What is your typical daily or weekly schedule?

DISCLAIMER AND SIGNATURE

I certify that the information in this application is accurate, current, and complete. I understand that misstatements or omissions may result in disqualification from further consideration or termination.

I authorize SwimWest to investigate my employment history, credentials, and to obtain any relevant information needed to make an employment decision. I hereby authorize my prior employers to release information relating to my employment. I release SwimWest and previous employers from any liability that may result from the release or use of such information.

I understand that nothing contained in this application, granting of an interview, or scheduling training creates a contract for employment. If an employment relationship is established, I understand that employment will be terminable "at will", meaning I have the right to terminate my employment at the end of a session and that SwimWest has that same right.

Signature

Date