

Name (first, mid int., last)

Date dd/mm/yy

Current Address

Zip

City

State

S.S#

Telephone

Cell

Desired Position

Date available

Desired salary

Have you ever been convicted of a felony or misdemeanor?

Employment History: List your most Current employer

Company & Address

Phone #

Supervisor

Position held

Employment History: List your Second employer

Company & Address

Phone #

Supervisor

Position held

Employment History: List your Third employer

Company & Address

Phone #

Supervisor

Position held

Educational Background: List the last three (3) schools you went to, beginning with the most recent

Name & Address

Years Completed

Graduate?

Major/Degree

Educational Background: 2 List your Second school

Name & Address

Years Completed

Graduate?

Major/Degree

Educational Background: 3                      List your Third school

Name & Address

Years Completed

Graduate?

Major/Degree

Subjects of special study/ special training/skills/certifications:

References:

List three (3) personal or professional people not related to you, whom you have known at least one year.

Name & Address 1

Phone

Relationship

How Long

Name & Address 2

Phone

Relationship

How Long

Name & Address 3

Phone

Relationship

How Long

Authorizations:

"I certify that the facts in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by all authorized company representative."

Signature

by checking this box you authorize your signature

Date dd/mm/yy

Print Out | Send To:

Noonan Family Swim School, Inc.

P.O. Box 285

Del Mar, CA 92014