

The Wedgewood Swim and Tennis Club

Employment Application

Date _____
Last name _____ First name _____ Middle name _____
Street Address _____
City _____ State _____ ZIP _____
Telephone _____ Social Security # _____
Email address _____

Position applied for _____

Have you been employed by The Wedgewood Club before? _____

If yes, when? _____

When can you start? _____

When will you need to leave at the end of season? _____

Are you looking for full-time employment? Yes No

If no, what hours are you available? _____

Are you under 18 years old? Yes No If yes, date of birth _____

Are you willing to work evenings and weekends? Yes No

Do you have any current certifications, ie CPR, Lifeguarding, WSI? Yes No

If yes, please list. _____

Education

	School Name and Location	Year	Major	Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
College	_____	_____	_____	_____
Post-College	_____	_____	_____	_____
Other Training	_____	_____	_____	_____

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

Employment History (Start with most recent employer)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

References

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is “at will,” which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature _____ Date _____