

Diver Dan's, Inc. - Application for Employment

Pre-Employment Questionnaire • An Equal Opportunity Employer

Date _____

PERSONAL INFORMATION

| | |
|--------------------------|---|
| Name (First Middle Last) | Social Security Number |
| Present Address | Date of Birth (Month-Day-Year) |
| City, State, Zip Code: | Home Phone: |
| Cell Phone: | Current Work Phone: |
| E-Mail Address | Emergency Contact (Name & Phone Number) |

EMPLOYMENT POSITION – SWIM INSTRUCTOR (Must be 18 years old to apply)

| | | |
|------------------------------------|---------------------------------------|---------------------------|
| Position SWIM INSTRUCTOR | When Can You Start? | Salary Desired |
| Are You Currently Employed? | May We Contact Your Present Employer? | Ever Applied Here Before? |

EDUCATION

| Education | Name and Location of School | Years Attended | Did You Graduate? | Subject Major |
|--------------|-----------------------------|----------------|-------------------|---------------|
| High School | | | | |
| College | | | | |
| Post-College | | | | |

EMPLOYMENT HISTORY

(List Below Last Three Employers, Starting With Most Recent)

| Date Month/Year | Name and Location of Employer | Salary | Position | Reason For Leaving |
|-----------------|-------------------------------|--------|----------|--------------------|
| | | | | |
| | | | | |
| | | | | |

REFERENCES

Give The Names Of Three Persons Not Related To You, Whom You Have Known For At Least Two Years.

| Name | Address/Phone Number | Business | Years Known |
|------|----------------------|----------|-------------|
| | | | |
| | | | |
| | | | |

CERTIFICATIONS

Which of the following certifications do you currently have or have had in the past:

| Certification | Year & Location Course Completed | Are you Current? |
|--|----------------------------------|------------------|
| Lifeguard / WSI Water Safety Instructor | | |
| CPR - Adult | | |
| CPR - Child | | |
| First Aid | | |
| Oxygen Provider | | |
| AED Provider | | |

AVAILABILITY

Swim School Hours: Monday-Thursday: 10am to 6pm; Friday 10am to 5pm

| When Can You Start? | Monday | Tuesday | Wednesday | Thursday | Friday |
|---------------------|--------|---------|-----------|----------|--------|
| | | | | | |

AUTHORIZATION

"I certify that the facts contained in this application are true to the best of my knowledge and I 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 *Diver Dan's, Inc.* any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release *Diver Dan's, Inc.* from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of *Diver Dan's, Inc.* has any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing, unless it is in writing and signed by the president *Diver Dan's, Inc.*

Date: _____ Signature: _____

----- **DO NOT WRITE BELOW THIS LINE** -----

Interviewed By: _____ Date: _____

| |
|----------|
| Remarks: |
| |