

AQUATIC MANAGEMENT GROUP, INC.

Employment Application

(Please Print Clearly Below)

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Email Address	Cell Phone #	Cell Phone Carrier	
Current Age	Date of Birth	Social Security #	
Position Applying For		Desired Hourly Pay \$	
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, when?			
Have you ever been charged and/or convicted of a felony, misdemeanor or sexual offense? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
Have you ever been issued a summons, citation, or ticket to appear in court? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
Are you currently on trial or awaiting trial on criminal charges? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
Do you have any pending charges against you? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
*If during your employment with Aquatic Management Group you are issued a summons, citation, or ticket to appear in court you must report it to Ben Everhart beverhart@aquaticmanagementgroup.com within 48 hours.			

EMERGENCY CONTACT (IF UNDER 18, LIST PARENT/GUARDIAN AS EMERGENCY CONTACT)	
Full Name	Relationship
Email Address	Phone #

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES (PLEASE LIST PERSONAL AND/OR PROFESSIONAL REFERENCES)	
Full Name	Relationship
Company	Phone #
Full Name	Relationship

REFERENCES CONTINUED (PLEASE LIST PERSONAL AND/OR PROFESSIONAL REFERENCES)

Company	Phone #
Full Name	Relationship
Company	Phone #

CURRENT/PREVIOUS EMPLOYMENT

Employer	Position		
Supervisor	Phone #		
Starting Date	Ending Date	Starting Pay \$	Ending Pay \$
Employer	Position		
Supervisor	Phone #		
Starting Date	Ending Date	Starting Pay \$	Ending Pay \$

AVAILABILITY (MARK ALL THAT APPLY)

I currently attend high school.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	I currently attend a college or university.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I currently have another job.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	I plan to have another job while working with Aquatic Management Group.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I am available to work weekdays and weekends from May – June.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	I am only available to work weekends from May – June.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I am available to work weekdays and weekends from August – September.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	I am only available to work weekends from August – September.	YES <input type="checkbox"/>	NO <input type="checkbox"/>

CERTIFICATIONS

Lifeguarding	<input type="checkbox"/> American Red Cross	<input type="checkbox"/> YMCA	<input type="checkbox"/> Other	Completion Date	Expiration Date
NSPF CPO	Completion Date	Expiration Date			
Wake County CPO	Completion Date	Expiration Date			

POOL SELECTION (IF YOU ARE NOT FAMILIAR WITH FACILITIES WE MANAGE, LEAVE BLANK)

Choice 1 _____	Choice 2 _____	Assigned Pool _____
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HOW DID YOU HEAR ABOUT US? (MARK ALL THAT APPLY)

<input type="checkbox"/> Website (www.AquaticManagementGroup.com)	<input type="checkbox"/> Indeed.com or Craigslist.com	<input type="checkbox"/> Neighborhood Sign
<input type="checkbox"/> School	<input type="checkbox"/> Referred (Family or Friend)	If referred, who referred you? _____

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate termination.	
Signature	Date