Pool Watch Inc.

Position Applying For: Lifeguard		Pool Manager			
Full Name		Are you 16 years of age or older?			
Full AddressStreet		Town			Zip Code
Home Phone	Cell Phone				
Email address Driver's License Number					
High School	Yes	No	Currently atto	ending	-
Some College	Yes_	No	Currently	attending	
College Graduate Yes No					
Former Employer Information Personal Reference Information	Name		Phone	#	
	Name		Phone #	¥	
What certifications do you hold, or have held?					
Please list an Emergency Contact Name and Phone Number:					
Are you available to work the week before Memorial Day weekend through Labor Day? Yes No					
If "no" Please specify the dates in which you are available to work					
Have you ever been arrested or cor If yes, please explain	Yes	No			
Have you ever been discharged from a past employer? If yes, please explain			Yes	No	
Do you have a history of medical problems? If yes, please explain		Yes	No		

I ______ certify that all of the above information submitted by me is true and complete to the best of my knowledge.

Signed

Date

Please email, mail or fax this application to: Pool Watch Inc. 179 West Irving Park Road Roselle, Illinois 60172 Phone: 630.529.1117 Fax: 630.529.1118 Email: <u>Eric@Poolwatch.net</u> Website: <u>www.poolwatch.net</u>