

Callan Swim School

Employment Application

Applicant Information										
Full Name:	I Name:			Date:						
	Last	First		М.І.						
Address:										
	Street Address				Apartment/Unit #	1				
	City			State	ZIP Code					
Phone:		E	Email							
Date Availat	ole:	Social Security No.:		Desire	ed Salary: <u>\$</u>					
Position Applied for:										
Are you a citizen of the United States?						NO □				
YES NO Have you ever worked for this company? □ □ □										
YES NO Have you ever been convicted of a felony? 										
If yes, explain:										
Education										
High School	:	Address:								
From:	То:	Did you graduate?	YES NC							
College:		Address:								
From:	То:	Did you graduate?	YES NC	Degree:						
Other:		Address:								
From:	То:	Did you graduate?	YES NO							
References										
Please list t	three professional ref	erences.								
Full Name:				Relatio	onship:					
Company:				F	Phone:	,				
Address:										

Full Name:				Relationship:
				Phone:
Address:				
Full Name:				Relationship:
				Phone:
A ddrooo.				
	Previous E	mployme	ent	
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting Salary:\$			Ending Salary: \$
Responsibilities	:			
From:	То:			
May we contact	your previous supervisor for a reference?	YES	NO □	
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting Salary:			Ending Salary:
Responsibilities	:			
From:	То:			<u> </u>
May we contact	your previous supervisor for a reference?	YES	NO	
Compony				Dhanai
				Phone: Supervisor:
	Starting Salary:			
	:			
From:	To: Reason for Leaving			
May we contact	your previous supervisor for a reference?	YES	NO	

Military Service							
Branch:	From: To:						
Rank at Discharge:	Type of Discharge:						
If other than honorable, explain:							
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 release.							
Signature:	Date:						

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