



Employment Application

DuPage Swimming Center, Inc.
 520 N. Oakhurst Dr.
 Aurora, IL 60504
 630-692-1500 • 630-692-1528 fax

Date: _____

Name: _____ Social Security Number: _____

Address: _____
Street City State Zip

Phone Number: _____ e-mail Address: _____

Date of last physical examination: _____

In case of emergency notify: _____
Name Relationship Phone

Applying for: _____ **Front Desk** _____ **Swim Instructor** _____ **Lifeguard**

Education:

<i>School</i>	<i>Area of Study</i>	<i>Years Completed</i>	<i>Degree Obtained?</i>

Past Work Experience:

<i>Company</i>	<i>Address</i>	<i>Phone</i>	<i>Supervisor</i>

Current Certifications:

<i>Name</i>	<i>Agency</i>	<i>Expiration Date</i>

Business/Work/School References:

<i>Name</i>	<i>Address</i>	<i>Phone</i>

Please complete reverse side

Days Available:

	Mon	Tues	Wed	Thur	Fri	Sat	Sun	
AM								AM
PM								PM

of hours per week available: _____ desired # of hours per week: _____

Extra Curricular activities that impact your availability:

<i>Sport/Activity</i>	<i>Month(s) of commitment</i>	<i>Can you work at this time?</i>	<i>Days/Hours of availability?</i>

Can you commit to a full year of employment? _____

Related Questions:

- What prompted your application to the Dupage Swimming Center? _____
- If you were referred by a current employee, please give employee's name: _____
- Have you been convicted of a crime which has not been expunged, annulled, or sealed by a court? _____
If yes, please explain:
- Are you legally eligible to work in the United States? _____

Acknowledgement:

I certify that the information given on this application, accompanying information given, or to be given in any personal interview is a true and accurate representation of fact, and I understand that any misrepresentation or omission of such fact is grounds for immediate dismissal, no matter when discovered.

I further understand that any employment is conditional upon receipt of satisfactory references from former employers. I hereby authorize the DuPage Swimming Center and its agents to request and receive references from all past and present employers, schools or others who may provide any reference information from any and all liability resulting from such investigation.

I have carefully read the above Information Acknowledgement and I understand and agree to all of the statements.

Applicant Signature

Date