

APOLLO AQUATICS, INC.

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EMPLOYMENT APPLICATION

Date of Application ____ / ____ / ____

Position Desired (mark all that apply):

Lifeguard__ Maintenance__ Swim Instructor__ Attendant__ Coach__ Administrative__ General Labor__ Supervisor__

Name _____ Social Security # _____
Last First Middle

Current Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Main Email _____ Alternate Email _____

Cell Phone (____) _____ Alternate Phone _____

What is the best time & method to contact you? _____

If you are under 18, and it is required, can you furnish a work permit? Yes ____ No ____

If no, please explain _____

Are you legally eligible for employment in this country? Yes ____ No ____

Date available for work ____ / ____ / ____ What is your desired salary range? \$ _____ per hour / per year

Availability to work: Full time (Please indicate: Morning - Afternoon / Afternoon - Evening / ANY shifts)
 Part time (Please indicate: Mornings / Afternoons / Evenings / ANY)
 Temporary (Please indicate dates available: / to /)

Driver's license number (if driving is an essential job function) _____ Expiration _____

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation, and the position applied for will be taken into account.

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? Yes ____ No ____

If yes, please provide date(s) and details _____

How did you learn about us? Advertisement__ Friend__ Inquiry__ Employment Agent__ Relative__ Other__

If advertisement, please describe _____

Skills and Qualifications

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying _____

Lifeguards: Indicate current certifications held & needed recertifications (NR): LG/First Aid____ CPR/PR____ WSI____

Educational Background

	Name & Location	Years Completed / Current Status	Areas of Study
High School			
College			
Other			

Employment History

Are you currently employed?

Yes _____ No _____

If so, may we contact your present employer?

Yes _____ No _____

Provide the following information of your past three (3) employers, *most recent first*

1)
Employer _____ Dates Employed ____ / ____ to ____ / ____
Reason for Leaving _____ May we contact? Yes _____ No _____
Supervisor _____ Title _____
Address _____
Street City State Zip
Main Phone (____) _____ Main Email _____
Job Title / Duties _____ Rate / Salary \$ _____ per _____

2)
Employer _____ Dates Employed ____ / ____ to ____ / ____
Reason for Leaving _____ May we contact? Yes _____ No _____
Supervisor _____ Title _____
Address _____
Street City State Zip
Main Phone (____) _____ Main Email _____
Job Title / Duties _____ Rate / Salary \$ _____ per _____

3)
Employer _____ Dates Employed ____ / ____ to ____ / ____
Reason for Leaving _____ May we contact? Yes _____ No _____
Supervisor _____ Title _____
Address _____
Street City State Zip
Main Phone (____) _____ Main Email _____
Job Title / Duties _____ Rate / Salary \$ _____ per _____

Applicant Statement

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understanding 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 you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.
This application for employment shall be considered active for a period of time not to exceed ninety (90) days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.
I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard."

*** SIGN ONLY AFTER READING THE APPLICANT STATEMENT LISTED ABOVE ***

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____ / ____ / ____

FOR COMPANY USE ONLY

1st interview _____ 2nd interview _____ Hired / By _____ / _____ Paperwork _____