



JOB APPLICATION FORM – SWIMMING INSTRUCTOR

Date of application _____

Personal Information:

Name	
Address	
Phone	Email Address
Date of Birth	Social Security #
How were you referred to us?	

Education & Training:

Type of School	Name and Location of School	Degree/Area of Study	No. of Years Attended	Completed (circle one)	
High School				Yes	No
College				Yes	No
Other				Yes	No

Special Skills (Circle Yes or No):

Are you CPR/AED certified? Yes No Certification Date _____

Are you lifeguard certified? Yes No Certification Date _____

Are you WSI certified? Yes No Certification Date _____



Experience:

Are you familiar with the American Red Cross *Learn to Swim* Program? If yes, please give your experience using this curriculum?

If no, please describe the curriculum/swim instructor training you have used for past swim teaching experiences.

What previous experience have you had teaching aquatic/swimming activities?
(Please specify where, dates and activities).

Date	Where	Activity
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.....		
.....		
.....		

References:

Please list at least 2 references below (Do not list relatives)

Name	Title/Position	Phone	Email