



Victory Aquatics Team "Thunderbolts"

Employment Application – Instructor / Lifeguard

Personal Information

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Date of Birth _____ Social Security _____ - _____ - _____

Bank info for Direct Deposit:

Bank Name: _____ Routing #: _____ Account #: _____

All new employees over 18 years of age are subject to a criminal history check and education verification

Position applying for: (check all those that apply)

*Are you 18 yrs old or older? YES ☐ NO ☐

*If under 18, one of your parent or legal guardian is required to co-sign this application for employment, agreeing that you can work and/or accept employment with the Victory Aquatics Team "Thunderbolts".

Parent/Guardian Name (print)

Parent/Guardian Signature

Date

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

PLEASE READ AND SIGN THIS APPLICANT'S STATEMENT:

- I certify that answers given herein are true and complete to the best of my knowledge.
- I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
- This application for employment shall be considered active for a period of time not to exceed 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 hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change, in writing.
- In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature

Date

FOR OFFICE USE ONLY:

Employment interview information (to be filled out by Head Coach or Assistant Coach)

Hire Date _____ Salary Rate \$ _____