Application For Employment

nit to: FAST, PO Box 8595, St Louis MO, 63126, Attn Talent Committee

A complete coaching application packet shall include: cover letter outlining interest in our organization, resume or vitae, application, & one page statement on coaching philosophy and values.

Flyers Aquatic Swim Team

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position(s) Applied For			Date of A	application	
How did you learn about us? □ Advertisement □ Employment Agency	Internet Friend	□ Relative □ Other	□ Inc		
Last Name First Name		Middle Name	Social S	ecurity Numb	er
Street Address			Home P	hone Number	
City State	Zip Code	e-mail	Business Ph	one and/or Ce	ll Phone
Best time to contact you at home is _		(time of day	y)		
If you are under 18 years of age, can			work?	□ YES	□ NO
Have you ever filed an application wi If Yes, giv				□ YES	□ NO
Have you ever been employed with u If Yes, giv	s before?			☐ YES	□ NO
Do any of your friends or relatives wo	ork here?	Name		□ YES	□ NO
Are you currently employed?				□ YES	□ NO
May we contact your present employe	er?			☐ YES	□ NO
Are you prevented from lawfully become Immigration Status <i>Proof of citizens</i>		-		□ YES	□ NO
Date available for work	What is you	ur desired salary or hourly rate?_		_	
Are you available to work:	☐ Full-time	(please indicate 1 2 3 shift	t)		
	Part-time	(please indicate Mornings	Afternoons	Evenings	Weekends)
	Temporary	(please indicate dates available	·//	′	/)
Are you currently on "lay-off" status	and subject to	recall?		□ YES	□ NO
Can you travel if a job requires it?			□ YES	□ NO	

Education	

	Name & Addr	ess of School	Course of Study	Years Completed	Diploma/Degree	
Elementary School						
High School						
Undergraduate						
Graduate						
Other (Specify)						
	Pro	fessional Lice	enses & Train	ing		
Are you currently:	□ Licensed	□ Eligible fo	or License			
Type:	State (s)	<u>. </u>	Da	ate:		
Number:	E	xpiration Date:		ASCA :		
List any experiences, specialized training, apprenticeships, skills, volunteer work, military training or extra-curricular activities that may be pertinent to the position(s). You may exclude information which indicates race, color, religion, gender, national origin, disabilities or other protected status.						
Specialized Skills (Check Skills/Equipment Operated)						
team manament meet manament lactate tes sports psy	ager ting chology	exercise sci scuba water polo nutrition None A I	ience Little A Lot	vide	erwater video eo analysis nechanics esiology	

Employment Experience

Start with your present or most recent job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

	Employer	Dates E	mployed	Job Title	
		From	To		
	Address			Supervisor	
	Address	Hourly Ra	te/Salary	Reason for Leaving	
	Telephone Number(s)	Starting	Final		
	Work Performed				
[Employer	Dates E	mployed	Job Title	
	Address	From	То	Supervisor	
	Address	Hourly R Starting	ate/Salary Final	Reason for Leaving	
	Telephone Number(s)				
l	Work Performed				
	Employer	Dotos E	mployed	Job Title	
ı					
	Address	From	То	Supervisor	
		From	То		
	Address	From		Supervisor Reason for Leaving	
	Address	From Hourly R	To ate/Salary		
	Address	From Hourly R	To ate/Salary		
	Address Address Telephone Number (s) Work Performed	From Hourly R Starting	ate/Salary Final	Reason for Leaving	
	Address Address Telephone Number (s)	From Hourly R Starting	To ate/Salary		
	Address Address Telephone Number (s) Work Performed	Hourly R Starting Dates E	ate/Salary Final mployed	Reason for Leaving	
	Address Address Telephone Number (s) Work Performed Employer	Hourly R Starting Dates E From	ate/Salary Final mployed To ate/Salary	Reason for Leaving Job Title	
	Address Address Telephone Number (s) Work Performed Employer Address	Hourly R Starting Dates E From	ate/Salary Final mployed To	Reason for Leaving Job Title Supervisor	

Additional Information

State any additional information you feel may be helpful to us in considering your application.				
Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING				
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? YES NO				
A review of the activities involved in such a job or occupation has been given? YES NO				
References				
1.				
Name Phone #				
Address E-mail				
2Name Phone #				
Address E-mail				
3. Name Phone #				
Address E-mail				
Have you ever been convicted for violating any law other than a minor traffic violation?				
☐ Yes ☐ No If yes, please explain the circumstances				
Applicant's Statement				
I certify that answers given herein are true and complete.				
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 not to exceed 45 days . Any applicant wishing to be considered for employment beyond this 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 Employee 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 such change is specifically acknowledged in writing by an authorized executive of this organization.				
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 of Applicant Date				