

**South Hills Swim Club  
Post Office Box 75085  
Charleston, West Virginia 25375-0085**

NAME: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_

What grade will you have completed at the end of the 2006-2007 school year? \_\_\_\_\_

School currently attending: \_\_\_\_\_

Are you currently certified in: First Aid \_\_\_\_\_ CPR \_\_\_\_\_ WSI: \_\_\_\_\_  
(Yes/No)

Life Saving \_\_\_\_\_ Other: \_\_\_\_\_

*Please note, proof of certification must be shown prior to Opening Day to insure employment.*

Position(s) for which you are applying:

Lifeguard (full time) \_\_\_\_\_

Lifeguard (part time) \_\_\_\_\_

Head Guard \_\_\_\_\_

Swim Team Coach \_\_\_\_\_

Manager \_\_\_\_\_

Assistant Manager \_\_\_\_\_

Will you be available to work the entire summer season? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please explain why and when you will not be available: \_\_\_\_\_  
\_\_\_\_\_

Please list work experience: \_\_\_\_\_  
\_\_\_\_\_

Please List Two References:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

When are you available to start work? \_\_\_\_\_ Will you swim on the South Hills Swim Team? \_\_\_\_\_

*Please use the reverse side to add additional information or comments which may be helpful for the Hiring Committee.*

**For Hiring Committee Use:** Hired \_\_\_\_\_ Position: \_\_\_\_\_ Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

Letter Sent: \_\_\_\_\_ Reply Received: \_\_\_\_\_ Certification Approved: \_\_\_\_\_