

# JOB APPLICATION



SOMA Aquatics Foundation is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

## **Applicant Information**

**Applicant Name:** \_\_\_\_\_

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

**City, State and Zip Code:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_

## **Employment Position**

**Position(s) applying for:** \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

On what date can you start working if you are hired? \_\_\_\_\_

## **Personal Information**

Are you 18 years of age or older? Yes No

Are you a U.S. citizen or approved to work in the United States? Yes No

What document can you provide as proof of citizenship or legal status?  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes No

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:  
\_\_\_\_\_  
\_\_\_\_\_

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

**Job Skills/Qualifications**

Please list below the skills and qualifications you possess for the position for which you are applying:

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**Education and Training**

**High School**

| Name | Location (City, State) | Year Graduated | Degree Earned |
|------|------------------------|----------------|---------------|
|      |                        |                |               |

**College/University**

| Name | Location (City, State) | Year Graduated | Degree Earned |
|------|------------------------|----------------|---------------|
|      |                        |                |               |

**Vocational School/Specialized Training**

| Name | Location (City, State) | Year Graduated | Degree Earned |
|------|------------------------|----------------|---------------|
|      |                        |                |               |

**More About You:**

Do you hold any Red Cross or other certifications? \_\_\_\_\_

Do you have swim instruction experience? \_\_\_\_\_

Are you available all 5 weeks of the program? \_\_\_\_\_

What is your experience working with youth? \_\_\_\_\_

What skills do you possess that would be an asset for this position?

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**Previous Employment**

**Employer Name:** \_\_\_\_\_

Job Title: \_\_\_\_\_

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

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

City, State and Zip Code: \_\_\_\_\_

Employer Telephone: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Employer Name:** \_\_\_\_\_

Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City, State and Zip Code: \_\_\_\_\_  
Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

**Employer Name:**

Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City, State and Zip Code: \_\_\_\_\_  
Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

**References**

Please provide 2 personal and professional reference(s) below:

| Reference | Contact Information |
|-----------|---------------------|
|           |                     |
|           |                     |

**Other Comments or Notes:**

Applicant Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

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