



# Application for Employment

P.O. Box 429, Bedford, TX 76095

Phone: 817-552-7946 Fax: 817-283-2486

[www.iswimemler.com](http://www.iswimemler.com)

I am interested in:  Austin Location  Plano Location  Preston Forest Location  
 Southlake Location  South Austin Location  Arlington Location (summer only)  
*(check all that apply)*

## Personal Information

Name (Last)	(First)	(Middle)					
Home Address	City	State	Zip				
Home Phone	Cell Phone	Email Address					
My Space Adress:							
If you are under the age of 18, please state your date of birth:					Social Security #:		
Position you are apply for:					What Shifts are you interested inworking?		
Date you are available:					Check all that apply <input type="checkbox"/> full-time <input type="checkbox"/> part-time <input type="checkbox"/> summer		
Vacation Dates:					How did you hear about us?		
Days and hours available to work	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Notes

## Education

Name and Location	Degree	Years Attended	Graduated
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No
College			<input type="checkbox"/> Yes <input type="checkbox"/> No
Other			<input type="checkbox"/> Yes <input type="checkbox"/> No

Honors Received/Athletic Achievements/School Clubs

**Special Skills**

Please list any training skills, or certifications (CPR/WSI/Lifeguard) which may be appropriate to the position for which you are applying.

**Background**

Have you ever been convicted or pleaded guilty to a felony in the last ten years? (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please explain below:

**Employment History**

From	Employer	Phone	Job Title	Starting Pay	Reason for leaving
To	Address	City,State,Zip	Duties	Ending Pay	Supervisor Name
From	Employer	Phone	Job Title	Starting Pay	Reason for leaving
To	Address	City,State,Zip	Duties	Ending Pay	Supervisor Name

**References (please do not list relatives)**

Name	Years Known	Title	Phone #
Name	Years Known	Title	Phone #
Name	Years Known	Title	Phone #

**Emergency Contact Information**

Name	Relation	Phone	Other #

In submitting this application for employment, I understand that an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record, and/or criminal history. I authorize anyone possessing this information to furnish it to Emler Swim School, LP and any third party upon request and I release Emler Swim School LP and any third party from all liability and damages whatsoever in furnishing, obtaining or using said information.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I understand also, that I am required to abide by all rules and regulations of Emler Swim School LP.

I understand and agree that if employed, the employment will be "at will." That is, either I or Emler Swim School LP may end the employment relations at any time, for any reason, or for no reason. I understand that receipt of this application by Emler Swim School does not imply employment and that this application and/or any other Emler Swim School documents are not contracts of employment.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_