



SOUTHERN VILLAGE CLUB 2025 Employment Application

Applicant Information – must be applicant’s information.

Email is primary method of communication. Use an email that will accept attachments.

Last Name	First Name	
Address		City, Zip
Cell Phone	Alt. Phone	
Email	School Attending in Fall	
Next year I will be a: FR <input type="checkbox"/> SO <input type="checkbox"/> JR <input type="checkbox"/> SR <input type="checkbox"/> Not applicable <input type="checkbox"/>		
Position(s) Applied For:		
Lifeguard <input type="checkbox"/> Head Guard <input type="checkbox"/> Asst. Pool Manager <input type="checkbox"/> Pool Manager <input type="checkbox"/> Office Admin <input type="checkbox"/>		
Head Coach <input type="checkbox"/> Asst. Swim Coach <input type="checkbox"/> Tennis Assistant <input type="checkbox"/> Tennis Professional <input type="checkbox"/>		
Camp & Tennis Camp Counselor <input type="checkbox"/> Gate/Snack Bar Attendant <input type="checkbox"/> Maintenance/Cleaner <input type="checkbox"/>		

Availability (more availability will give you hiring priority)

Date available to start:	Date I return to school:
Will you be available after this date to work part time? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Known times you will be NOT be available (family vacations, sports, etc.) Please be as detailed as possible. You will still need to enter these into the scheduling app upon hire.	
1.	
2.	
3.	
Are you involved in a sport that will affect your availability? Yes <input type="checkbox"/> No <input type="checkbox"/>	
How many hours per week: do you want to work? _____ do you need to work? _____	

Certifications – attach a copy of any CURRENT certifications – must be provided before hiring

Are you CPR certified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Expiration Date:
Are you Lifeguarding certified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Expiration Date:
Are you CPO certified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Expiration Date:

Are you aware of anything that would disqualify or prevent you from completing the responsibilities of the position for which you are applying? (i.e. health issues, criminal conviction, drug or alcohol addiction).
Yes No

If yes, then please explain: _____

Employment Record (starting with your most recent job)

Company Name _____ Job Title _____

Supervisor _____ Phone (_____) _____

Duties _____

Employed From _____ to _____ Hourly wage _____

Reason for leaving _____



Company Name _____ Job Title _____

Supervisor _____ Phone (_____) _____

Duties _____

Employed From _____ to _____ Hourly wage _____

Reason for leaving _____



References

<i>Name</i>	<i>Phone</i>	<i>Relationship</i>	<i>Years Known</i>
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1. _____

2. _____

3. _____

In case of emergency please notify:

Name _____ Phone _____ Email _____

I certify that I have given true, accurate and complete information on this form to the best of my knowledge. I authorize Southern Village Club to contact any of my previous employers, as well as any listed references to verify the facts and information I have furnished. I understand that false information or failure to disclose relevant information may be grounds for rejection of my application or for my dismissal if I am employed.

Applicant's Signature _____ **Date** _____

Remember to attach a copy of your certifications!
You may attach a resume in lieu of listing previous jobs.