## APPLICATION FOR EMPLOYMENT – POOL STAFF

Date	~				LOTIVILIA		100	LOIAI	
Name (Last Na						_			
Address							Phone	()	
St	reet		City	Sta	ate Zip (	Code	,		
What kind of wo									
What office mad									
Who referred yo	ou to us?	·							
Please check a	opropriat	te box:							
Are You: 15 to				Over	18 years old				
				EDUC	ATION				
SCHOOL	DATE		NAME OF		CITY		COURSE		DID YOU
	FROM TO		SCHOOL						GRADUATE?
Elementary									
Secondary									
College							5		
Other									
	l nation Act	of 1987 pr	ohibits di	scriminatio	n on the basis	of ag	e with re	espect to inc	lividuals who are at
least 40 but less tha						J			
				EXPER	RIENCE				
NAME & ADDRESS		DATE		DUTIES		ST	ART	FINAL	REASON FOR
OF COMPANY		FROM TO				PAY		PAY	LEAVING
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		BU	SINESS	/PERSO	NAL REFER	ENC	ES		
			DDRESS		OCCUPATIO			PHONE #	
		,							
					,				

List any related experiences y	ou have had in relation to the positi	on you are applying for:				
List Certifications that you pre		V.S.I., C.P.R., etc.) and the Chapter				
Certification	<b>Expiration Date</b>	Chapter of Authorization				
j9	•					
Teaching Experience (give da	ates and locations):					
Guarding Experience (give da	ites and locations):					
If under 18, do you have a wo	ork permit?					
Available for work: (give date	s):					
Beginning:	Number of hours per week:					
Finishing (if seasonal):	Circle applicable t	imes: Days Evenings Weekends				
SIGNATURE		DATE				
	provided on this application is true and corr					
MUIRFIELD ASSO	OCIATION, INC., 8372 MUIRFIELD	DR., DUBLIN, OH 43017				
TELE	EPHONE: 614-889-0922 FAX: 6	14-889-1142				
applicant's sex or minority status. Questions	oly with State and Federal fair employment practice la s directly or indirectly reflecting such status have been sible purpose such questions are appropriately noted	n included only where needed to determine a bona fide				
FOR OFF	FICE USE ONLY. TWO ID'S REQU	JIRED IF HIRED:				
	CURITY # BIRTH CERTIFICATE					
	OHIO I.D					
EMPLOYER'S INITIALS						