

McClure Pool applications
{West Beaver Township Veterans Memorial Pool}

- **Accepting applications for lifeguards and concession stand**
- **Give to applicant and have them mail to address on application**
(P.O. Box 155, McClure PA 17841)
- **Applications due April 16, 2018**
- **Any questions, contact:**

Janet Will - 570-765-5731 - jlwill1@verizon.net or

Lou Ann Wilson - 717-543-5712 - jlwilson11@verizon.net

WEST BEAVER TOWNSHIP VETERANS MEMORIAL POOL

P.O. BOX 155

MCCLURE PA 17841

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

					Date	_____
Name _____						
Last	First	Middle	Maiden			
Present address _____						
Number		Street	City	State	Zip	
How long _____						
Telephone () _____			If under 18, please list age _____			
e-mail _____						

EMPLOYMENT DESIRED

Position(s) applied for _____
List any certifications (with expiration dates), special training, or experiences pertaining to the position for which you are applying. _____
When will you be available for work (from when to when)? _____
Why do you want to work at the Pool? _____

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Business or Trade School				
Professional or Graduate School				

WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Please list an extra curricular activities that you have participated in or leadership experience that may relate to the position you are applying for.

Have you ever been employed by the Pool?

☐ Yes

☐ No

If yes, when? _____

Do you have any friends or relatives employed by the Pool?

☐ Yes

☐ No

If yes, please provide their names and relationship to you.

If hired, would you have a reliable means of transportation to and from work?

☐ Yes

☐ No

Are you able to perform the essential functions and duties
of the job for which you are applying?

☐ Yes

☐ No

REFERENCES

Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

APPLICATION FORM WAIVER

Please read each paragraph closely, initial each, and sign below

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any other document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize West Beaver Township Veterans Memorial Pool to thoroughly investigate my references, work records, education, and other matters related to my suitability for employment. I further authorize the employers, schools and other references I have listed to disclose to West Beaver Township Veterans Memorial Pool any and all documents, transcripts, letters, reports and other information related to these references, without giving me prior notice of such disclosure.

I understand that nothing contained in the application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and West Beaver Township Veterans Memorial Pool, other than one that is "at will." I understand and agree that if I am employed, my employment will be of an "at will" nature, whereby either the employee or the employer may terminate the employment relationship at any time, with or without cause or notice. I further understand that my employment, if hired, is for no definite or determinable period of time and may be terminated at any time, at the option of either myself or West Beaver Township Veterans Memorial Pool, and that no promise or representation contrary to the foregoing is binding on the company unless made in writing and signed by me and the company's designated representative.

Signature of applicant: _____ Date: _____

West Beaver Township Veterans Memorial Pool is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, or disability. We assure you that your opportunity for employment with West Beaver Township Veterans Memorial Pool depends solely on your qualifications.

Thank you for completing this application form and for your interest in the pool.