

JOB APPLICATION FORM	Date//
PERSONAL INFORMATION:	
First Name	
Middle Name	
Last Name	DOB
Street Address	
City State CA	Zip
Home Number () Cell Phone ()	
E-Mail SS #	<u>4</u>
Are you eligible to work in the United States?	
Yes No	
If you are under age 18, do you have an employment/age certificates?	
Yes No	
Have you been convicted of or pleaded no contest to a felony within the las Yes No	st five years?
If yes, please explain:	
Do you have an active CPR/First Aid certificate? Yes No (*Requ	uired for many positions at ESA)
Other certificates:	
POSITION APPLYING FOR/AVAILABILITY:	
Position Applying For (please circle one):	
Swim Lessons: Instructor Swim Camp Coach Deck Supervisor	
Administrative: Customer Service	
Sports Camp: Camp Assistant Camp Counselor Site Director Camp Coordinator	
Swim Team: Summer Swim Team Age- Group Coach Assistant Coach Head Coach	
Days/Hours Available - Please check off on the hours that you are available on each day requested	
Monday am pm Tuesday am pm Wednesday am pm	
Thursday am pm Friday am pm Saturda	y am
When are you available to start training if hired?	
Are you applying for a summer position only (please circle) Yes No	
If hired, are you able to work outside of summer months (please circle)	Yes No
If in school, what is the first day you are available to work:	
If in school, what is the last day that you are available to work:	
If applying for a summer position, will you need vacation time during the summer months? Yes No	
Please Detail	
Hourly Desired \$	

^{*}Please attach your resume to this job application