



**MUST BE SUBMITTED WITH CURRENT DMV PRINTOUT
(DATED WITHIN LAST 30 DAYS)**

Employment Application

Applicant Information									
Full Name:						Date:			
<i>Last</i>			<i>First</i>			<i>M.I.</i>			
Address:									
<i>Street Address</i>					<i>Apartment/Unit #</i>				
<i>City</i>					<i>State</i>		<i>ZIP Code</i>		
Phone:		()			E-mail Address:				
Date Available:					Social Security No: UPON EMPLOYMENT		Desired Salary: \$		
Position Applied for:		Pool Service Technician			Are you at least 21 years of age?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Driver License #:
Are you authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you ever worked for this company?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Upon an offer of employment, you understand that we may conduct a criminal background check that may result in voiding the offer of employment. Please read notice below.		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Upon an offer of employment, you understand that a drug screen will be required, and that a positive result will void the offer of employment.				YES <input type="checkbox"/>	NO <input type="checkbox"/>
A background check is necessary to determine if you have any convictions that would reasonably prevent us from hiring you due to the nature of the job duties you would perform (i.e. entering & having access to customer yards & access to sensitive customer information, keys, combos, payments, etc.)									

Education			
High School:		Address:	
College:		Address:	
Other:		Address:	

References

Please list three personal or professional references.

Full Name:		Relationship:	
Company:		Phone: ()	
Address:			
Full Name:		Relationship:	
Company:		Phone: ()	
Address:			
Full Name:		Relationship:	
Company:		Phone: ()	
Address:			

Emergency Contact Information

Name: _____ Ph#: _____

Alternate - Name : _____ Ph# _____

Previous Employment						
Company:				Phone:	()	
Address:				Supervisor:		
Job Title:						
Responsibilities:						
From:		To:		Reason for Leaving:		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company:				Phone:	()	
Address:				Supervisor:		
Job Title:						
Responsibilities:						
From:		To:		Reason for Leaving:		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company:				Phone:	()	
Address:				Supervisor:		
Job Title:						
Responsibilities:						
From:		To:		Reason for Leaving:		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	

ADDITIONAL INFORMATION	
Can you drive a manual transmission (stick) vehicle?	
Do you have adequate transportation to and from work?	
Upon an offer of employment:	
1) a drug screen will be required (a positive test result will terminate job offer)	
2) a copy of your current valid driver's license will need to be on file for employment records	
3) your social security # will need to be on file for employment records	

Disclaimer and Signature	
<p><i>I certify that my answers are true and complete to the best of my knowledge.</i></p> <p><i>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</i></p>	
Signature: _____	Date: _____

How did you hear about this job opening? Indeed / Craigslist / Social Media / Other: _____