

REQUIRED INFORMATION

Sun & Surf Enterprises, inc.

www.sunsurf.org • office: 732-886-8861 • email: info@sunsurf.org

APPLICATION FOR EMPLOYMENT

LAST NAME _____ FIRST NAME _____ M.I.__ CITY______ STATE _____ ZIP CODE _____ PHONE _____ DATE OF BIRTH_____ AGE _____ EMAIL: ALTERNATE ADDRESS (i.e. a temporary summer or college address if applicable. Don't forget APT #s) ADDRESS CITY STATE ZIP CODE _____ PHONE _____EMAIL: PERSON TO CONTACT IN CASE OF EMERGENCY NAME ______ PHONE ______ PHONE _____ AVAILABLE START DATE **END DATE** LIST HIGH SCHOOL, COLLEGES/UNIVERSITIES YOU HAVE ATTENDED: HIGH SCHOOL NUMBER OF YEARS ATTENDED______ GRADUATION DATE _____ COLLEGE/UNIVERSITY _____ NUMBER OF YEARS ATTENDED______ GRADUATION DATE _____ NUMBER OF YEARS ATTENDED GRADUATION DATE WHAT ARE YOU MAJORING IN? CURRENT G.P.A. DO YOU PLAN TO GO ON TO GRADUATE SCHOOL? _____ WHAT MAJOR? WHAT DATE DO YOU PLAN TO COMPLETE ALL OF YOUR SCHOOLING? ARE YOU TAKING SUMMER COURSES? _____ IF YES, DATES AND TIMES _____

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CURRENT CERTIFICATIONS: (Please attach a copy of current certs)

LIFEGUARD TRAINING		EXP. DATE		
FIRST AID		EXP DATE		
PROFESSIONAL RESCUER C.P.R		EXP. DATE		
BLOODBORNE PATHOGENS		EXP. DATE		
DEFIB		EXP. DATE		
OXYGEN?		EXP. DATE		
PREVIOUS LIFEGUARD and/or C	ABANA RELATED WORK EX	(PERIENCE:		
COMPANY	<u>POSITION</u>	DIRECT SUPERVISOR	PHONE NUMBER	
1				
FROM	то		SALARY	
REASON FOR LEAVING?				
COMPANY	<u>POSITION</u>	DIRECT SUPERVISOR	PHONE NUMBER	
2				
			SALARY	
REASON FOR LEAVING?				
COMPANY	<u>POSITION</u>	DIRECT SUPERVISOR	PHONE NUMBER	
3				
FROM	то		SALARY	
REASON FOR LEAVING?				
LIST ANY OTHER WORK EXPERI	ENCE YOU HAVE:			
COMPANY	<u>POSITION</u>	DIRECT SUPERVISOR	PHONE NUMBER	
1				
FROM	то		SALARY	
REASON FOR LEAVING?				
COMPANY	<u>POSITION</u>	DIRECT SUPERVISOR	PHONE NUMBER	
2				
FROM	то		SALARY	
REASON FOR LEAVING?				

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LIST AT LEAST THREE REFERENCES

NAME	ADDRESS	OCCUPATION	YEARS KNOWN	PHONE NUMBER
1				
2				
LIST ANY EXTRA	A CURRICULAR ACTIVITIES OF	R HOBBIES YOU ARE INVOL	VED IN	
LIST ANY SPORT	TS OR ATHLETICS YOU ARE IN	IVOLVED IN		
HAVE YOU BEE	N VACCINATED FOR HEPATIT M AND WHEN	IS B?		
	R BEEN CONVICTED OF A CRI			
ENTERPRISE		HAT THE DATA SET		ITION WITH SUN & SUR PPLICATION IS TRUE AN
SIGNATURE OF	APPLICANT		DATI	<u></u>
PRINT NAME: _				