## Antioch Recreation Association

## **Employment Application**

				Perso	onal Info	ormat	ion						
Full Name:													
Last First						rst						M.I.	
A.I.I													
Address: Street Address								Apartment/Unit #					
	 City							State		ZIP C	ode.		
	City							State		211 (	oue		
Phone:			Email:						SSN:				
Position Applied for:								Desired Hourly Wage:					
							YES	NO					
Have you had experience in the position/work you are applying for?													
When would you be available for employment (for school, etc.)?  Date Available:													
Are there any reasons that would prohibit you from working weekends, evening, etc. (swim team, another job)?													
How many o	days a week do	you wisl	n to work?	?									
Days of the week that you are <b>unable</b> to work:  Sun Mon Tue Wed Thu Fri									Sat				
Type of Life	guard/CPR cert	tificate:											
When rece								Expires:					
			En	nergency	y Conta	ct Info	rmation	า					
Dlagge list th	ne name and pi	hone nun							margano	17			
	ie name una pi	none nan	iber of the	e person v	we shoul	a conta	ict iii cus	e oj un en	riergene	y.			
Full Name:	Last				First								
D.				_	.,								
Phone:				Em	iail:							-	
				Ed	ucation	Statu	S						
Completed Completed I	ollege: High School:	YES YES YES YES YES	NO		Complete								
Attending High School: Year Completed:													

## $A_{ntioch} \; R_{ecreation} \; A_{ssociation}$

## References

Please list up to three references. References s Do not list relatives.	should show the relationship to you (teacher, former employer, etc.)
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
D	isclaimer and Signature
I certify that my answers are true and complet	
	erstand that false or misleading information in my application or
, , , , , , , , , , , , , , , , , , , ,	e 14 or 15 years old, you will need to obtain an Employment https://doli.virginia.gov/labor-law-youth-employment/
Link to access the Virginia Electronic Employm https://vaeecs.doli.virginia.gov/vaeecs/	ent Certificate System (work permit):
Signature:	Date:
Please email your completed application to: ara	recpoolemployment@gmail.com.