

Andover Lake Property Owners Association
EMPLOYMENT APPLICATION

Name: _____

Current Home Address: _____

Phone Number: _____

E-mail address: _____

Social Security #: _____

Availability: (Please list date you would be able to start and any dates in between you would not be available: _____

Minimum Salary Requirement: \$_____

Have you ever been convicted of a felony or misdemeanor crime? Yes No

If yes, please explain the nature of the crime, including the date, location and outcome _____

Please note that failure to disclose requested information about your criminal background may be an omission or misrepresentation of fact resulting in the denial of your application for employment or immediate termination.

Are you over the age of 18? Yes No

Are you legally authorized to work in the United States? Yes No

What position are you applying for? _____

Have you worked for ALPOA before? Yes No

If yes, list dates and jobs _____

Certification and Certifying Agency

Expiration Date

Lifeguard: Red Cross YMCA WSI Other: _____ _____

First Aid: Red Cross National Safety Council Other: _____ _____

CPR: ARC CPR Pro-Rescuer AHA Level "C" issued w/in one year _____

Other: _____ _____

Paid Employment Experience (list most recent jobs first)

Employer: _____

Address: _____

Telephone: _____

Supervisor's Name and Title: _____

Dates Employed (Month & Year) From: _____ To: _____

Ending Salary: _____

Reason for Leaving: _____

Was your termination voluntary? Yes No

If no, please explain: _____

Employer: _____

Address: _____

Telephone: _____

Supervisor's Name and Title: _____

Dates Employed (Month & Year) From: _____ To: _____

Ending Salary: _____

Reason for Leaving: _____

Was your termination voluntary? Yes No

If no, please explain: _____

Employer: _____

Address: _____

Telephone: _____

Supervisor's Name and Title: _____

Dates Employed (Month & Year) From: _____ To: _____

Ending Salary: _____

Reason for Leaving: _____

Was your termination voluntary? Yes No

If no, please explain: _____

REFERENCES

Name _____

Phone _____ Relationship _____

Name _____

Phone _____ Relationship _____

Name _____

Phone _____ Relationship _____

ALPOA is an equal opportunity employer. We do not discriminate in hiring or employment on the basis of race, color, religion, creed, national origin, citizenship status, sex, sexual orientation, marital status, age, disability or veteran status. No question on this application is intended to secure information about these subjects.

As part of ALPOA's normal procedure in processing applications, a routine inquiry will be made concerning your background. Former employers, educational institutions and personal and employment references may be contacted to verify and obtain information concerning your background, qualifications and/or school and work records

I hereby authorize ALPOA to conduct all pre-employment inquiries as described.
I hereby authorize ALPOA to verify any statements contained in this application.

Applicant's Signature

Date

I have read this application and understand the questions that were asked. All of the information that I have provided on this application is, to the best of my knowledge, truthful. This application is not an employment contract nor does it constitute an offer of employment.

Applicant's Signature

Date