

Moorhead Country Club  
 2101 N River Dr  
 Moorhead, MN 56560  
 Phone: 218-236-0100



# Employment Application

**LIFEGUARD**

## Personal Information

Last		First		MI	Email
Street Address			City	ST	Zip
Mobile Phone			Home Phone		
Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No			If No, state your age		
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			SSN#		
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No			Branch		Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
War			What position are you applying for?		
How did you hear about this position?			Desired amount of hours		
Desired Wage			Date Available		

## Prior Work Experience

	Current or Most Recent		Prior		Prior	
Employer						
Address						
City, ST, ZIP						
Telephone						
Name of Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position/Job Title						
Pay						
Reason for Leaving						
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

## Education

	Name/Location	Last Year Complete				Degree	Major or Emphasis
High School		9	10	11	12		
College/University		1	2	3	4		
Trade School							
Other							
List any applicable special skills, training or proficiencies.							

## Certification

Lifeguard Training	<input type="checkbox"/>	Expiration	_____
CPR/PR	<input type="checkbox"/>	Expiration	_____
WSI	<input type="checkbox"/>	Expiration	_____

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.	Signature	Date
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