TWAIN HARTE LAKE

P.O. Box 338 Twain Harte, CA 95383 209-586-4449

Application for Employment

DI FACE TYPE OF PRINT OF FARILY	DATE DECENT
PLEASE TYPE OR PRINT CLEARLY	DATE RECEIVI

PLEASE TYPE OR PRIN	NT CLEARLY		DATE RECEIVED:			
PERSONAL INFORMAT	TION					
Name:First	Middle	Last	Otho			
			Our	er		
Current Mailing Address:	: Street/PO Box	City/Zip	Dhone	Phone No.		
	Street/PO Box	City/Zip	Phone	No.		
Permanent Address:	eet	City/7in		Di ana Ma		
Sire	et	City/Zip	1	Phone No.		
Email:						
POSITION(S) APPLYING	G FOR					
Position for which you ar	e applying:					
Do you have a California	Driver's License? YES	e NO				
-						
Have you ever been disn	nissed or asked to resign fro	m your employment	? YES NO			
EDUCATION: (College, High School, Elementary, Other)						
School	Location	# of Years	Did you Graduate	Degree/Diploma		

EMPLOYMENT (List last Position first)

Employer:			Phone:()
Address:			
Name and Title of Supervisor:			
Your Job Title Duties:			
Employed: From	_ to	_ Salary: Start	Ending
Reason for leaving			
Employer:			Phone:()
Address:			
Name and Title of Supervisor:			
Your Job Title Duties:			
Employed: From	to	Salary: Start	Ending
Reason for leaving			
Employer:			Phone:()
Address:			
Name and Title of Supervisor:			
Your Job Title Duties:			
Employed: From	to	Salary: Start	Ending
Reason for leaving			
REFERENCES: (List three referen	ices who have first-ha	and knowledge of you	u and your work. Do not list persons
NAME:			Address:
City/State/Zip:			Phone: ()
NAME:			Address:
City/State/Zip:			Phone: ()
NAME:			Address:
City/State/Zip:			Phone: ()

SPECIAL CERTIFICATES AND LICENSES:

LIFEGUARD / SWIM LESSON INSTRUCTOR Do you possess a Red Cross Lifeguard Certificate?YESNO. Date Certificate is Valid to: Do you possess a WSI/LGIYESNO. Date Certificate is Valid to:					
Any other applicable certifications, please list here					
COMMENTS OR ADDITIONAL INFORMATION YOU FEEL IS IMPORTANT IN REGARDS TO THIS APPLICATION:					
I verify that all statements made on this application are true, and I understand and agree that any misstatement or omissions of material fact may forfeit my rights to employment at Twain Harte Lake.					
DATE SIGNATURE					
RETURN COMPLETED APPLICATION PACKAGE TO: Twain Harte Lake Association					

PO Box 338

Twain Harte, CA 95383