

West	5 th	Street / P	ю в	ox 122
		Grafton,	ND	58237

Lifeguard Application Form

		Аррі	IC-ant I	ntorma	ation			
Full Name:				Date:				
	Last	First		M.I.				
Address:								
Street Address						Apartment/Un	it #	
	City					State ZIP Code		
Phone:	Phone:		Email					
Desired Sala	ary:							
Position App	blied for:							
		YES	NO				YES	NO
Are you employed now?				lf ye	If yes, may we inquire your present employe			
						o and phone number:		
Have you ever worked for this company?		YES NO If yes, when						
Are you 18 years of age or older?		YES			-			
Ale you to y								_
High School			Educa	ation				
riigii School			-	YES	NO			
From:	To:	Did you gr	aduate?			Diploma::		
College:					NO			
From:	То:	Did you gr	aduate?	YES		Degree:		
			Refere	ences				
Please list a	a professional reference.							
Full Name:						Relationship:		
Company:						Phone:		
Address:								
		Disc <u>la</u>	imer ar	nd <u>Sig</u> i	nat <u>ure</u>			

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: