



Anderson Hills Inc. P.O. Box 54110 Cincinnati, Ohio 45254

**2023 EMPLOYMENT APPLICATION**

**INSTRUCTIONS:** please complete the following application and email it to [ahstclub.manager@gmail.com](mailto:ahstclub.manager@gmail.com)

**Personal Information**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

D.O.B. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Spring school ending date \_\_\_\_\_ Fall school beginning date \_\_\_\_\_

Date available to start work \_\_\_\_\_

Dates unavailable this summer \_\_\_\_\_

I am available to work weekends in the following months: (indicate with an "x")

	Yes	No
<b>April</b>		
<b>May</b>		
<b>Sept</b>		

I am available to work the following major Holiday weekends: (indicate with an "x")

	Yes	No
<b>Memorial Day (May 27<sup>th</sup> – 29<sup>th</sup>)</b>		
<b>4<sup>th</sup> of July (July 1<sup>st</sup> – 3<sup>rd</sup>)</b>		
<b>Labor Day (September 2<sup>nd</sup> – 4<sup>th</sup>)</b>		

**Position(s) Applying For (check or highlight all that apply; you may select multiple positions):**

- Lifeguard   
  Snack Shack   
  Groundcrew   
  Management  
 Swim Coach   
  Swim Lesson Instructor

**Red Cross or other training certificates** (please list below and include expiration dates)

\_\_\_\_\_  
\_\_\_\_\_

**Education Name of school      City/State      Number of years completed**

\_\_\_\_\_  
\_\_\_\_\_

**Work Experience (please list your present, or most recent experience first)**

Company \_\_\_\_\_ Telephone number \_\_\_\_\_

Address \_\_\_\_\_ Job Title \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ Telephone number \_\_\_\_\_

Address \_\_\_\_\_ Job Title \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**Please read carefully before signing form**

I certify that the information contained in this application is true and correct. I authorize all previous employers to give needed information to Anderson Hills Swim and Tennis Club, Inc for purposes of obtaining an account of my work experience.

Digital Signature \_\_\_\_\_ Date \_\_\_\_\_