

Pete Alewine Pool & Spa Company, Inc.

**PLEASE PRINT ALL
INFORMATION
REQUESTED**

Application for Employment

Applicants may be tested for illegal drugs

Date _____

Name _____
Last
First
Middle

Present address _____
Street
City
State
Zip

How long _____

Telephone _____ Other Number _____

If under 18, please list age _____

Days / hours available to work:

Position applied for (1) _____
 And salary desired (2) _____
 Be specific

Mon _____ Thur _____
 Tue _____ Fri _____
 Wed _____ Sat _____
 Sun _____

How many hours can you work weekly? _____ Can you work nights? _____
 Employment desired _____ Full-time only _____ Part-time only _____ Full or part-time
 When available for work? _____

**Have you sustained any injury in the past that may prohibit you working in a construction environment?
 (i.e., back or neck injury, heat stroke, etc) _____**

Type of School	Name of School	Location	Number of years completed	Major & Degree
High School				
College				
Bus. Or Trade School				
Professional School				

Have you ever been convicted of a crime? _____ No _____ Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Military

Have you ever been in the armed forces? _____ Yes _____ No

Are you now a member of the National Guard? _____ Yes _____ No

Work Experience

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer: Address: City, State, Zip Code: Phone number:	Name of last supervisor	Employment dates	Pay or salary
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer: Address: City, State, Zip Code: Phone number:	Name of last supervisor	Employment dates	Pay or salary
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer: Address: City, State, Zip Code: Phone number:	Name of last supervisor	Employment dates	Pay or salary
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer: Address: City, State, Zip Code: Phone number:	Name of last supervisor	Employment dates	Pay or salary
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer? Yes No

Do you have a driver's license? Yes No

What is your means of transportation to work? _____

Have you had any accident during the past three years? _____ How Many? _____

Have you had any moving violations during the past years? _____ How Many? _____

Office Application Only

Typing _____ WPM	Word Processing: _____
Computer _____ Mac _____ PC	List all Computer Applications that you know:
Other Skills _____	_____
_____	_____
_____	_____

Please list two references other than relatives or previous employers:

Name _____
Position _____
Company _____
Address _____

Telephone _____

Name _____
Position _____
Company _____
Address _____

Telephone _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.