

SOKOL POOL LIFEGUARD APPLICATION

Name _____

Age _____ Birthdate _____ Male or Female (circle)

Cell phone _____

Home Address _____

What school do you attend? _____ Grade _____

You must be an American Red Cross Lifeguard holding an “up to date” certification. Do you? _____

When complete if still training? _____

Please provide a copy of your American Red Cross Lifeguard Certificate

SOKOL POOL requires you to be available to work at LEAST 4 days out of 6 most weeks if needed. Are you willing to commit that much time to your summer lifeguard job? _____ Initials _____

Do you have any previous lifeguard experience? _____

Where and when? _____

List past employment, references and contact numbers

