



Clearwater Pool Management, LLC

110 Pamunkey Turn, Yorktown, Va 23693 757.715.7744 | 757.766.5588

2012 Employee Application

POSITION APPLIED FOR _____
DATE AVAILABLE FOR EMPLOYMENT _____

Equal Opportunity Employer
Drug Free Workplace

PERSONAL DATA

Name _____ Social Security No. _____
Last First Middle

Mailing Address _____
Street City State Zip

Home phone/other number where you can be reached _____ Cell phone _____
Email Address _____ Date of Birth ____/____/____

REFERENCES

List three persons who are not related to you who have definite knowledge of your qualifications for the position for which you are applying, such as co-workers, teachers, etc. DO NOT list supervisors you have listed elsewhere on this employment application.

Name, Occupation, and Address	Phone	Years Known

GENERAL INFORMATION

- Are you legally eligible to work in the United States? YES NO
- Have you ever been convicted of a misdemeanor, felony, child abuse, or sex-related crime? YES NO

If yes, please explain: _____

NOTE: A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, how recent the offense was, nature of the crime and type of job for which you are applying will be considered.

- Do you have a valid driver's license? YES NO

EDUCATION

	Name/ Location	No. Years Completed	Graduated (Y/N)	Degree
High School				
GED				
College				
Other				

EMPLOYMENT HISTORY (list most relevant first)

Employer	Address	Telephone
Job Title	Name of Supervisor	Date Employed (mo/yr)
		Date Separated (mo/yr)

Employer	Address	Telephone
Job Title	Name of Supervisor	Date Employed (mo/yr)
		Date Separated (mo/yr)

Employer	Address	Telephone
Job Title	Name of Supervisor	Date Employed (mo/yr)
		Date Separated (mo/yr)

EXPERIENCE/ CERTIFICATIONS

List experiences/ certifications that relate to the position for which you are applying:

Successful applicants must produce, for proof of identification, a driver's license and social security card or passport.

<p>The information set forth in this application is true and complete. I understand that if employed, false statements on this application will be considered grounds for dismissal.</p> <p>Signature: _____ Date: _____</p>
--

I am an applicant for a position with CPM. I understand that CPM is committed to a drug and alcohol free work-place to ensure the quality of our services and commitment to our customers. I hereby consent to submit to the testing for drugs and/or alcohol as shall be determined by CPM in the selection process of applications for employment, for the purpose of determining the drug and/or alcohol content thereof. I agree that the laboratory or health care provider CPM designates may collect specimens for these tests and may test them, if qualified, or forward them to a licensed laboratory designated by the company for analysis. I further agree to and hereby authorize the release of results of said test to CPM. I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Print Name: _____ Date: _____

Signature: _____