

MARTIN'S DAM
APPLICATION FOR EMPLOYMENT

Return to
Box 4
Wayne, PA

Date _____ Soc. Sec. No. _____

Name _____
Last
First
Middle

Present Address _____
Street
City
State

Permanent Address _____
Street
City
State

Phone No. (HOME) _____ (COLLEGE) _____

Age _____ Member of Martin's Dam? () Yes () No

Certification: [] Junior [] Senior Lifesaving [] WSI Other: _____

Work Desired: _____ Date you can start: _____ Last date for work: _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

Current school attending: _____ Grade level: _____

FORMER EMPLOYERS (List below last three employers, starting with last one first)

Date Month & Year	Name & Address of Employer	Position	Reason for Leaving
From _____			
To _____			
From _____			
To _____			
From _____			
To _____			

REFERENCES: Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Years Acquainted
1.		
2.		
3.		

PHYSICAL RECORD:

Have you any defects in hearing: _____ In Vision? _____ In Speech? _____

In case of emergency notify: _____
 Name Address Phone No.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Date _____ Signature _____

PLEASE DO NOT WRITE BELOW THIS LINE

Interviewed by: _____ Date _____

REMARKS: _____

Neatness		Character	
Personality		Ability	

Hired _____ Position _____ Will Report _____ Salary Wages _____