



# EMPLOYMENT APPLICATION

**Swedish American Patriotic League - SVEADAL**  
**8220 Croy Road Morgan Hill, CA 95037**

**Please  
submit by  
April 15<sup>th</sup> 2022**

For questions and to submit your application,  
 Please contact: Stephanie Talbot (530) 409-3895 sprice1909@gmail.com

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Age by June:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ **Driver's License:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Positions Applying for:**       **Full-time**     **Part-time**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Summer Manager  | <input type="checkbox"/> Clubhouse/Kitchen Coordinator | <input type="checkbox"/> Grounds/Maintenance/Custodial |
| <input type="checkbox"/> Lifeguard       | <input type="checkbox"/> Dishwasher/Kitchen Support    | <input type="checkbox"/> Kids Evening Activities       |
| <input type="checkbox"/> Shack Attendant | <input type="checkbox"/> Head Dinner Server            | <input type="checkbox"/> Rental Inventory/Restocking   |

**Certifications and Expiration Dates:**

*(please attach a copy of all current certificates for LIFEGUARD, CPR, FIRST-AID, etc)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Work Permit Number:** \_\_\_\_\_

**Work Experience:**

*(please include additional information on separate piece of paper, if needed)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**References:**

Name: _____	Phone: _____
Name: _____	Phone: _____
Name: _____	Phone: _____

**Summer Season Employment Dates:**

Opening Weekend May 28/29 + Summer Program June 12 thru Sept 5 + Closing Weekend Sept 24/25