

# Turpin Hills Employment Application

## PLEASE READ CAREFULLY

Thank you for your interest in the Turpin Hills Swim & Racquet Club. **In order to have your application processed, you must thoroughly answer all questions on the application form. Applications filled out incompletely will not be considered.** While we encourage you to attach a resume, please note that a resume will not substitute for completing any portion of this application. All information will be treated confidentially.

Turpin Hills Swim & Racquet Club, an Equal Opportunity Employer, considers applicants for all positions without regard to race, color, religion, sex, age, national origin, disabled or veteran status, or other legally protected status.



### **Turpin Hills Swim & Racquet Club, Inc.**

Club Address: 5925 Clough Pike | Cincinnati, Ohio 45244 | (513)231-3342

Mailing Address: C/O Seibel & Katz CPAs | 3814 West Street | Suite 311 | Cincinnati, OH 45227

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## General Information

Last Name	First	Middle Initial	Social Security No. - -	
Street Address		City	State	Zip Code
Home Phone ( )	Work Phone ( )	Other Phone ( )		
Position Applied For (Check all that apply) <input type="checkbox"/> Assistant Manager <input type="checkbox"/> Lifeguard <input type="checkbox"/> Front Desk <input type="checkbox"/> Concessions <input type="checkbox"/> "Head" Position		Salary Requirement <input type="checkbox"/> Hourly   Amount \$ _____	Date Available	
How did you learn of this vacancy (please list the specific employee, newspaper, web site, or other source)?				
Have you previously used any other names besides what is provided above? <input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, please specify below:				
Are you over 15 years old? <input type="checkbox"/> No <input type="checkbox"/> Yes				
Are you eligible for employment in the United States? <input type="checkbox"/> No <input type="checkbox"/> Yes (If offered employment, you will be required to provide documentation to verify eligibility.)				

## Previous Club Membership Affiliation

Are you now or have you ever been a member of the Turpin Hills Swim & Racquet Club? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list the dates of membership below:
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## Education

High School Name	City	State	Diploma/Equivalent? <input type="checkbox"/> Yes <input type="checkbox"/> No
College and/or Technical School Name	City	State	Degree? <input type="checkbox"/> Yes <input type="checkbox"/> No
Major	Degree Earned	If degree not earned, years completed: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	
Other Training or Degrees School Name	City	State	
Major	Degree Earned		

## Professional Licenses or Certifications

Life guarding Certification	No.	Issuing State or Organization	Expiration Date
CPR-FPR Certification	No.	Issuing State or Organization	Expiration Date

## Record of Conviction

Have you ever been convicted of a crime other than a minor traffic offense (including during Military Service)? <input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, explain:
<small>A record of a criminal conviction will not necessarily bar you from employment.</small>

**Equal Opportunity Employer**

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**Employment History:** List current/last employer first, include U.S. military service.

Employer Name		Address		City	State	Zip Code
Telephone No. (     )		Your Title			Department	
Beginning Date	Ending Date	Final Salary	Supervisor's Name & Title			
If you are still employed, may we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Summary of duties:						
Reason for leaving:						
Employer Name		Address		City	State	Zip Code
Telephone No. (     )		Your Title			Department	
Beginning Date	Ending Date	Final Salary	Supervisor's Name & Title			
Summary of duties:						
Reason for leaving:						
Employer Name		Address		City	State	Zip Code
Telephone No. (     )		Your Title			Department	
Beginning Date	Ending Date	Final Salary	Supervisor's Name & Title			
Summary of duties:						
Reason for leaving:						

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

Have you ever been discharged or asked to resign from a job?  No     Yes    If yes, explain:

I hereby certify that the facts set forth in this employment application are true and complete to the best of my knowledge. I understand that false statements of any kind or omission of facts called for on this application are a basis for dismissal regardless of when they are discovered. I understand that any employment offered is for an indefinite duration, unless otherwise specified in writing, and is at-will, which means that either I or the Turpin Hills Swim & Racquet Club may terminate my employment at any time with or without notice or cause. I further understand that neither the policies, rules, regulations of employment, application for employment, nor anything said during the interview process shall be deemed to constitute the terms of any implied employment contract.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

# Invitation for Self-Identification for Applicants

The Turpin Hills Swim & Racquet Club is an equal opportunity employer. In recognition of its responsibility to its paid and volunteer staff, and the community it serves, the Turpin Hills Swim & Racquet Club affirms its policy to assure fair and equal treatment in all of its employment practices for all persons. We consider applicants for all positions without regard to race, color, religion, sex, age, national origin, disabled or veteran status, or other legally protected status. To help us track our organizational success, we ask your assistance in filling out this voluntary self-identification form. In addition to our internal tracking, the Turpin Hills Swim & Racquet Club must meet government record-keeping and reporting requirements.

Completion of this form is voluntary, and will not affect your application for employment with the Turpin Hills Swim & Racquet Club. This information will be kept in confidence and will not accompany your application to the prospective supervisors. Please contact the EEO Office if you have any questions.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Position applying for: \_\_\_\_\_

## Check all that apply:

*Female*

*Male*

*White, Not Hispanic*

*Hispanic or Latino*

*Black or African-American, Not Hispanic*

*Asian or Pacific Islander*

*American Indian or Alaskan Native*

*Vietnam Era Veteran:* A veteran who: (1) served on active duty for more than 180 days any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged or released with other than a dishonorable discharge, or (2) was discharged or released from active duty for a service connected disability if any part of such active duty was performed between August 5, 1964 and May 7, 1975.

*Other Protected Veteran:* Veteran's who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized.