

THE DOLFUN SWIM LESSON COMPANY
APPLICATION FOR EMPLOYMENT

Name: _____

Address: _____

City, State, Zip code: _____

Phone Numbers: _____

E-mail: _____

Driver's license Number: _____

Certifications: WSI, advanced lifesaving; CPR: first aid, springboard diving, scuba diving, EMT.

Please provide a copy of your driver's license and all certification documents that you have (WSI, CPR, etc.) and if you can include a photo of yourself that would be great!

Child development experience, including Psychology or early childhood development classes:
Please describe:

Have you taught children under the age five to swim? What ages?

Please write a short paragraph about your swimming career (teams, programs, etc.) and your relationship with teaching swimming especially to children under the age of five.

Work Experience:

THE DOLFUN SWIM LESSON COMPANY
DOLFUN INSTRUCTOR & COMPANY AGREEMENT
(COMPANY COPY)

As a swim instructor, I _____
understand that I am, and will be considered an independent contractor. I am totally responsible for the procedure in which I do my job as well as my schedule and how I conduct myself during the jobs that I do. I do not hold Dolfun Swim Lessons, it's owners, agents or representatives liable for any law suits or claims that might be brought against me in the, event that I am negligent due to my actions during the course of my work.

Initial- _____

I also understand that the information I receive regarding the Standard Operational Procedure of, the Dolfun Swim Lessons Company, i.e. forms, and advertisement copy, concepts, trade secrets, as well as the clients and referrals are the sole property of the Dolfun Swim Lessons Company.

Initial- _____

I promise not to steal, use and/or abscond, embezzle or extort anything from the Dolfun Swim Lessons Company. This includes clients and the clients referred to the company by another client even if I am the teacher of the primary client. I understand that all refer clients belong to Dolfun Swim Lessons.

Initial- _____

I promise not to make any special deals or claims on my personal behalf regarding my clients. In other words, I will not undercut or change the prices for lessons for my personal benefit without consulting the proper agent of the Dolfun Swim Lessons Company.

Initial- _____

If I act maliciously on my behalf and steal clients or referrals to my benefit, or if a selfishly embezzle funds or profit that do not belong to me I am aware that the cost to the company is great and that \$5,000.00 for each infraction is a reasonable penalty.

Initial- _____

I also understand that I am working for commission which is based on the gross amount of money collected from the client and that my commission is 35% of the sale which is approximately \$16.00-\$20.00 per hour for actual teaching time.

Initial- _____

Instructor Signature _____ Date _____

Instructor's Name (printed) _____

THE DOLFUN SWIM LESSON COMPANY
DOLFUN INSTRUCTOR & COMPANY AGREEMENT
(INSTRUCTOR COPY)

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Initial- _____

Instructor Signature _____ Date _____

THE DOLFUN SWIM LESSON COMPANY

INSTRUCTOR POLICIES AND PROCEDURES

1. Your notebook should be complete with all forms and taken to every lesson.
2. A Lesson Order Form (LOF) is to be made out for each Client at the time the lesson is given to you by Dolfun Swim Lessons (DOLFUN).
3. Call your new Clients immediately, unless otherwise instructed.
4. List each Client on a separate Income/Attendance Form and keep very accurate records as to date and times of lessons taught.
5. Call the Office within 24 hours and give us the dates and times of your lessons. Until this is done, the lesson is not booked.
6. Make sure the Client has your home and cell phone numbers (or other reliable way of contacting you).
7. Update your Weekly Time Schedule (WTS) as changes occur and send an updated copy to the Office. If changes are minor, you may call them in.
8. **In** the event of a cancellation made by the Client, call the office immediately and record the date on your Income/Attendance Form.
9. **In** the event of an emergency or possible tardiness, call your Client first and then call the Office.
10. Be on time to all lessons and do not take anyone to the lessons with you, unless otherwise instructed.
11. Do not make any special deals with the Clients. Refer them to the Office.
12. If you make a cancellation or change an appointment time, be sure to do it at least 24 hours in advance and make sure you provide make-up within that week's time.
13. You will be paid as follows: You will receive a check for 50% of your commission within the first two weeks of each new lesson. You will receive a second check for the remaining 50% at the completion of the last lesson for that series when your Attendance Record Form is received in the Main Office.

I understand and agree to all of the above.

Instructor Signature _____ Date _____

Instructor's Name (printed) _____
