

Application for Employment

POSITION DESIRED: (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Admissions/Tickets | <input type="checkbox"/> Lifeguard |
| <input type="checkbox"/> Concessions/Food Service | <input type="checkbox"/> Swim Instructor |

Name _____ Today's Date ____ / ____ / ____

Present Address _____ City _____ Zip _____

Contact Number (____) _____ - _____ Alternate Number (____) _____ - _____

Email _____

Are you under the age of 16? ☐ Yes ☐ No

Were you employed by the Rogers Aquatics Center last summer? ☐ Yes ☐ No

Have you ever been convicted of a crime? ☐ Yes ☐ No

If so, please provide date and details _____

If hired, what date can you start work? _____

May be required to work some holidays, nights and weekends as needed

LIFEGUARDS ONLY

Are You Currently Certified? ☐ Yes ☐ No

If yes, list all certifications held _____

If no, are you currently registered for a certification class? ☐ Yes ☐ No

If yes, list dates and location for certification class _____

Please list specific lifeguard experiences that have improved your lifeguard/guest service skills:

REFERENCES

List name and telephone number of three non-family member references.

Name	Relationship to Candidate	Telephone	Years Known

EMPLOYMENT HISTORY

Starting with your most recent employer, assignments or volunteer activities, provide the following information

Employer	Telephone # () -	From: Month Year	To: Month Year
Street Address	City	State	

Starting Job Title/Final Job Title	Immediate Supervisor and Title
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May we contact for reference? ☐ Yes ☐ No

Summary of job responsibilities:

Employer	Telephone # () -	From: Month Year	To: Month Year
Street Address	City	State	

Starting Job Title/Final Job Title	Immediate Supervisor and Title
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May we contact for reference? ☐ Yes ☐ No

Summary of job responsibilities:

Employer	Telephone # () -	From: Month Year	To: Month Year
Street Address	City	State	

Starting Job Title/Final Job Title	Immediate Supervisor and Title
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May we contact for reference? ☐ Yes ☐ No

Summary of job responsibilities:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 60 days.

In the event of employment, I understand that false or misleading information given in my application or interviews may result in discharge. I understand, also, that if employed I will be required to abide by all rules and regulations of the City of Rogers Parks & Recreation Department.

Signature of Applicant _____ Date _____

AN EQUAL OPPORTUNITY EMPLOYER