

Clatskanie Swimming Pool

Clatskanie Park & Recreation District Swimming Pool Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Mailing Address Apartment/Unit #

City State ZIP Code

Cell #: _____ Email: _____

Emergency Contact (name/phone #): _____

Position Applying for: HEAD LIFEGUARD LIFEGUARD SWIM INSTRUCTOR
Note: Head Lifeguards must have 2 yrs. Lifeguarding experience.

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO
 Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO
 Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO
 Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Work Experience

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Previous Experience


What is your personal swimming background? _____

Describe your most recent lifeguarding experience. _____

What is your **swim instructor** background? Please be specific with respect to ages and abilities taught. _____

Current Certifications (List **current** certifications and their expiration date, i.e. LG, FA and CPR/AED, WSI, etc.)
Certifications: _____ Expiration Date: _____

Disclaimer and Signature

 Please initial here to verify that you will be 15 years of age by the last day of the lifeguard training/certification course. **You can contact Cyndi Warren for training dates.**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____