

NEW EMPLOYEE
Syracuse Swimming Pool Application 2012 – DUE Feb. 24th!

NAME _____

ADDRESS _____

CITY _____ ZIP _____

CELL PHONE NUMBER _____

E-MAIL ADDRESS _____

POSITION APPLYING FOR: (circle all that may apply)

- | | | |
|---------------------------|----------------------|-----------------|
| POOL MANAGER | FULL-TIME LIFEGUARD | SWIM INSTRUCTOR |
| ASSISTANT POOL
MANAGER | PART-TIME LIFEGUARD | OFFICE HELP |
| | SUBSTITUTE LIFEGUARD | |

QUALIFICATIONS: (circle all that may apply) If you know the expiration date, please write it to the side.

- Lifeguard Certification
 CPR and 1st Aid
 Pool Operators License
 Water Safety Instructor Certificate
 Other: _____

EDUCATION:

	School	Course of Study	Grade Level or Years completed	Diploma Degree
Elementary School		-----		-----
High School		-----		
College				

PREVIOUS EMPLOYMENT:

Position	Company	Dates Employed	Date Left	Reason Left

ALL EMPLOYEES – Describe your **work ethic** and why you would be a good lifeguard. (I.e. – respect, timeliness, etc.) _____

If you need additional space, please use the back of this sheet or another sheet.

ACTIVITIES YOU ARE IN: (Sports, clubs, etc.) _____

PREFERRED HOURS TO WORK: The pool is always open. This includes weekends, evenings, and holidays. In scheduling, we try to conform to everyone's schedule. Please list your preferred hours of employment, but note that these will not definitely be the hours you work. _____

****You will be required to work until the pool closes Labor Day weekend in September** unless previous arrangements have been made prior to scheduling. You will be required to find a substitute for dates you will not be able to work (very important in August in September).

Specific times you may need off during the summer. If you are not sure, please list camps you will be attending. It is your responsibility to find a replacement during your leave. _____

REFERENCES: (No family members or people you live with.) The City does check these references.

1. _____
Name Phone

Address

2. _____
Name Phone

Address

Have you been convicted of a felony within the last 7 years? ____yes ____no, If yes, please explain_____

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 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.
I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.
In the even of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. We are an equal opportunity employer.

Signature _____

Date _____

Decisions will be made by mid-March in order to get everyone trained by pool season.