

**CITY OF MINERAL POINT**

137 HIGH STREET, SUITE 1  
MINERAL POINT, WI 53565

**SEASONAL POOL EMPLOYMENT APPLICATION**

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NAME \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

SUMMER ADDRESS, IF DIFFERENT \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

ARE YOU AT LEAST 16 YEARS OF AGE? YES \_\_\_\_\_ NO \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

(EMPLOYEES UNDER 18 ARE REQUIRED TO OBTAIN A WORK PERMIT UPON HIRING)

ARE YOU PRESENTLY A FULL TIME STUDENT? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, CIRCLE ONE: HIGH SCHOOL COLLEGE

**EDUCATION**

NAME OF HIGH SCHOOL \_\_\_\_\_ YEAR OF GRADUATION \_\_\_\_\_

NAME OF COLLEGE \_\_\_\_\_ YEAR OF GRADUATION \_\_\_\_\_

MAJOR COURSE OF STUDY (IF APPLICABLE) \_\_\_\_\_

**POSITIONS YOU ARE APPLYING FOR**

HEAD LIFEGUARD \_\_\_\_\_

ASSISTANT HEAD LIFEGUARD \_\_\_\_\_

FULL TIME LIFEGUARD \_\_\_\_\_

PART TIME LIFEGUARD \_\_\_\_\_

HEAD SWIM TEAM COACH \_\_\_\_\_

ASSISTANT SWIM TEAM COACH \_\_\_\_\_

I WILL BE AVAILABLE FROM \_\_\_\_\_ TO \_\_\_\_\_  
MONTH/DAY MONTH/DAY

WERE YOU EMPLOYED BY THE MINERAL POINT POOL LAST YEAR? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, WHAT WAS YOUR POSITION? \_\_\_\_\_

HOW MANY YEARS HAVE YOU WORKED AT THE POOL \_\_\_\_\_

ARE YOU AVAILABLE FOR MORNING WORK? YES \_\_\_\_\_ NO \_\_\_\_\_

ARE YOU AVAILABLE FOR AFTERNOON WORK? YES \_\_\_\_\_ NO \_\_\_\_\_

ARE YOU AVAILABLE FOR EVENING WORK? YES \_\_\_\_\_ NO \_\_\_\_\_

WHAT DAYS ARE YOU AVAILABLE? \_\_\_\_\_

WHAT HOURS ARE YOU AVAILABLE? \_\_\_\_\_

MONTH/DAY DO YOU HAVE A VACATION PLANNED? YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES, WHEN? \_\_\_\_\_

## FIRST AID/SPECIAL TRAINING

HAVE YOU HAD ANY FIRST AID TRAINING? YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES, CHECK THE COURSES YOU HAVE COMPLETED

_____ STANDARD FIRST AID CERTIFICATE	DATE RECEIVED _____	DATE EXPIRED _____
_____ LIFEGUARD	DATE RECEIVED _____	DATE EXPIRED _____
_____ CPR (FOR THE PROFESSIONAL RESCUER CERTIFICATE)	DATE RECEIVED _____	DATE EXPIRED _____
_____ WSI	DATE RECEIVED _____	DATE EXPIRED _____
_____ FIRST AID INSTRUCTOR CERTIFICATE	DATE RECEIVED _____	DATE EXPIRED _____
_____ OTHER _____		

## REFERENCES

PLEASE LIST THREE CHARACTER REFERENCES, WHO ARE NOT RELATIVES & YOU HAVE KNOWN FOR AT LEAST ONE YEAR:

1. \_\_\_\_\_ PHONE \_\_\_\_\_

2. \_\_\_\_\_ PHONE \_\_\_\_\_

3. \_\_\_\_\_ PHONE \_\_\_\_\_

### **IN CASE OF EMERGENCY, NOTIFY:**

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NAME	ADDRESS	PHONE
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"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing information to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice."

SIGNATURE: \_\_\_\_\_ DATE OF APPLICATION: \_\_\_\_\_

PARENT SIGNATURE (IF UNDER 18): \_\_\_\_\_ DATE OF APPLICATION: \_\_\_\_\_