



Parks & Rec Seasonal Employment Application

Applicant Information

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

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Social Security #: _____ Desired Salary: \$ _____ /hr. Full-time

Can Start? Date: _____ Stop Work? Date: _____ Part-time _____/hrs

Position Applied for: Pool Manager Head Lifeguard Lifeguard Cashier Slide Attendant
 Mower Campground Manager Other: _____

Do you have customer service experience/handling money? Yes No Are you under age 18? Yes No

CPR/First Aid certified? Yes No Received where? _____

Lifeguard Training Certificate? (Pool) Yes No Received where? _____

WSI - Water Safety Instructor Certificate? (Pool) Yes No Received where? _____

Can you give Swimming lessons if asked? (Pool) Yes No

Are you legally authorized to work in the U.S.? YES NO Have you ever worked for the City of Kenton? YES NO

Do you have any relatives working for the City of Kenton? If yes, name: _____

Are you able to perform the essential functions of the job with or without reasonable accommodation? Yes No

Are you able to work any shift? Yes No If no, explain: _____

Do you have a valid State of Ohio Driver's License? Yes No (attach copy)

List any Licenses or Certifications you have related to or required for this position (attach copies):

Education

High School: _____ City/State: _____

From: _____ To: _____ Did you graduate? YES NO Course of study: _____

College/
Trade: _____ City/State: _____

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

References

Please list three professional references who are not related to you:

Full Name: _____ Relationship/
Yrs Acquainted: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full Name: _____ Relationship/
Yrs Acquainted: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full Name: _____ Relationship/ Yrs Acquainted: _____
 Company: _____ Phone: _____
 Address: _____ Email: _____

Previous Pool Experience (if applicable)

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

Previous Employment

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

List any additional relevant skills/training: _____

List dates you cannot work during the season (vacations, etc.) Pool-You are expected to be available for the summer.

April	May	June	July	August	September	October

Disclaimer and Signature

The City of Kenton is an Equal Opportunity employer. We do not discriminate based upon sex, race, color, religion, gender identity, sexual orientation, national origin, disability, protected Veteran status, age, or any other characteristic protected by applicable law.

I certify the information set forth in this application is true, accurate, and complete to the best of my knowledge. I understand and accept that any information found to be falsified or intentionally excluded, may disqualify me from further consideration or, if employed, may result in disciplinary action, including termination of my employment. I authorize the employers, schools, and personal references named in this application to provide and release employment and academic records, and other information regarding myself to the City of Kenton.

If employed, I understand and accept that, depending on the department I am applying for, I may be required to work evening shifts, night shifts, weekends, and/or be on call and be required to work mandatory overtime. I further understand, if employed, I will be required to provide proof of identity and employment eligibility to work in the United States.

Signature: _____ Date: _____