

**FALLEN TIMBERS FAMILY RECREATION CLUB LIFEGUARDING APPLICATION**

NAME \_\_\_\_\_

LAST

FIRST

MIDDLE

ADDRESS \_\_\_\_\_

NUMBER

STREET

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

CELL PHONE NO. \_\_\_\_\_ AGE(as of May 1) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**DATES YOU WILL BE AVAILABLE FOR WORK:**

FROM: \_\_\_\_\_ TO : \_\_\_\_\_

(Day & Month)

(Day & Month)

**DAYS OF THE WEEK YOU WILL BE AVAILABLE FOR WORK (please circle):**

MON TUES WED THURS FRI SAT SUN

**DAILY HOURS YOU WILL BE AVAILABLE FOR WORK:**

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

Will you need any extended time off for vacation, trips, summer camps, school, etc.? YES NO

If yes, please indicate the dates you will need off:

FROM: \_\_\_\_\_ TO : \_\_\_\_\_

(Day & Month)

(Day & Month)

FROM: \_\_\_\_\_ TO : \_\_\_\_\_

(Day & Month)

(Day & Month)

Do you currently hold a lifeguarding certificate? YES NO

Do you currently hold a CPR certificate? YES NO

Are you available to work weekends and holidays? YES NO

**EXPERIENCE:** DESCRIBE BELOW ANY POSITIONS YOU HAVE HELD IN THE RECENT PAST, OR ANY OTHER EXPERIENCE WHICH YOU THINK MAY QUALIFY YOU FOR A POSITION. INCLUDE ALL PREVIOUS EMPLOYMENT. BEGIN WITH YOUR MOST RECENT EMPLOYMENT.

**Title of position:** \_\_\_\_\_ **Dates position was held:** \_\_\_\_\_

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Telephone number of employer: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

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**Title of position:** \_\_\_\_\_ **Dates position was held:** \_\_\_\_\_

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Telephone number of employer: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

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**Title of position:** \_\_\_\_\_ **Dates position was held:** \_\_\_\_\_

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Telephone number of employer: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

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Any additional comments, questions, or concerns?

CERTIFICATE OF APPLICANT: I hereby certify to the truth of all statements made in this application and agree that any false or misleading statements shall render null and void this application and any approval, appointment, or other favorable action made in connection therewith.

\_\_\_\_\_ Applicant Signature & Date

\_\_\_\_\_ Parent Signature (under 18) & Date

PLEASE COMPLETE REFERENCE PAGE ON NEXT PAGE OF THIS APPLICATION.

REFERENCES: PLEASE PROVIDE A LIST OF THREE PERSONAL REFERENCES THAT  
COULD BE CONTACTED.

**REFERENCE #1:** Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

**REFERENCE #2:** Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

**REFERENCE #3:** Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_