

Carthage Park District Swimming Pool Application

Employment Application for the season of 2018. June to August

Applicant Information

Full Name: _____ Date: _____
Last First M.I.
Address: _____
Street Address Apartment/Unit #
City State ZIP Code
Phone: () _____ **E-mail Address:** _____
Date Available: _____ **Social Security No.:** _____ **Desired Salary:** \$ _____
Position Applied for: _____

Certification Information

Are you a citizen of the United States?	YES	NO	Are you current certified in Red Cross CPR?	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Have you ever worked for the Carthage Park District before?	YES	NO	If No, explain?	_____	
	<input type="checkbox"/>	<input type="checkbox"/>			
Are you a currently a Red Cross certified Life Guard?	YES	NO	<u>Please provide copies of both Current Certifications.</u>		
	<input type="checkbox"/>	<input type="checkbox"/>			

If No, explain: _____

Education

High School: _____ **Address:** _____
From: _____ To: _____ **Did you graduate?** **YES** **NO** Degree: _____

College: _____ **Address:** _____
From: _____ To: _____ **Did you graduate?** **YES** **NO** Degree: _____

Other: _____ **Address:** _____
From: _____ To: _____ **Did you graduate?** **YES** **NO** Degree: _____

References

Please list three personal references.

Full Name: _____ **Relationship:** _____
Company: _____ **Phone:** () _____
Address: _____

Full Name: _____ **Relationship:** _____
Company: _____ **Phone:** () _____
Address: _____

Full Name: _____ **Relationship:** _____
Company: _____ **Phone:** () _____
Address: _____

(Over)

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

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

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

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:** _____

Please return with copies of both Current Certifications by May 1st to:

**Carthage Park District
305 Cherry Street
Carthage, IL 6232
% Chris Goetz**