

CITY OF GALENA, ILLINOIS



Galena Water Park Application

Name: _____ Date of Birth: _____

Address: _____

Phone #: _____ Email: _____

Have you worked at the water park previously? Yes No

Mark the position(s) you are applying for. Number your preferences in case your first choice is filled.

Supervisor Pool Swimming Lessons Coordinator Assistant Supervisor Pool

Swimming Lessons Instructor Certified Lifeguard Assistant Supervisor Concession

Concession Cashier

I am interested in full time or part time and I expect an hourly wage of \$_____.

Mark the following certifications you currently hold and their expiration date. You may be asked to show proof of certification.

Water Safety Instructor Expiration: _____

Advanced Lifesaving, i.e. Lifeguarding Expiration: _____

Junior Lifesaving Expiration: _____

CPR Expiration: _____

First Aid/Multi-media Expiration: _____

Food Service Sanitation Course Expiration: _____

Briefly describe what experience and qualifications you possess that make you the best candidate for the position(s) you have applied for.

When are you available to begin work? _____

What is the last day you will be able to work? _____

Are there any summer activities you participate in that may involve scheduling conflicts? If so, please list this information; such as softball, vacations, summer sport camps, etc.

List three (3) references below. Remember, these can not be family members or relatives. Please give their complete address and phone number.

Name: _____ **Phone #:** _____

Address: _____

Name: _____ **Phone #:** _____

Address: _____

Name: _____ **Phone #:** _____

Address: _____

List your last three places of employment. Include your job position and your supervisor's name. If we may not contact the supervisor, omit the phone number.

- 1. _____

- 2. _____

- 3. _____

Applicant's Signature **Date**