Orange City / Alton Aquatics Center Application for Employment E-mail: wellnessdir@orangecityiowa.com Phone: (712)707-9494

Position Desired (Check all that ap	ply):		,	•	
Supervisor			_ Substitute 0	Only	
Lifeguard			_ Aerobics In:	structor	
WSI			_ Other		
Which pool would you prefer to wo based on staffing needs and may be Orange City		•	•	ards will be sche	duled
Have you worked at the Orange Cit	y or Alton _l	oools in tl	ne past?	Yes N	No
If so, how many years?					
Are you willing to commit to request guarantee that you will be schedule will discuss this with you further atterms. This option may not be avainterest. Yes	ed 30+ hou nd you will ilable to ev	rs per wed be requir	ek? If you checled to sign a con	k yes, the pool m tract agreeing to	anager these
Personal Data:					
Name:				· · · · · · · · · · · · · · · · · · ·	
Home Address:					
College Address:					
Best Contact Phone Numb	oers:				
Birthdate:	_ Email A	ddress:			
Education:					
High School:			Graduatior	n Year:	
College:			Graduatior	n Year:	
Training:					
Do you	u have the fo	ollowing ce	ertifications?		
Red Cross Lifeguard:	Yes	No	Date Issued:		-
Red Cross First Aid:	Yes	No	Date Issued:		-
Red Cross CPR:	Yes	No	Date Issued:		-
			Date Issued: nt certifications		-
	don a copy of	- your ourre			
References: Name:	C	ity:		Phone No:	
1		-			
2					

Are you involved in any of the following Baseball	(check all that apply): Softball
High School Band	Volleyball
Football	
Briefly explain why you want to work at t you have that would make you a good er	the Orange City and Alton pools and what qualities mployee.
	and Alton Swimming Pools, you agree to adhere to alled in the employee handbook and other facility opera-
Print Name:	Application Date:
Signature:	