

Central Klickitat County Parks and Recreation District
P.O. Box 640 Goldendale, Washington 98620
(509) 773-0506

Application for Employment

(Please Print)

Position Applied For: _____	Date: _____
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How did you learn about this position?		
Advertisement	Friend/Relative	Employment Agency
Through a class at the CKCPRD Swim Pool	Other: _____	

Last Name: _____ First Name _____ Middle Initial _____

Address: _____ City, State, Zip _____

Phone _____ Alternate Phone _____

If you are under 18 can you provide proof of eligibility to work? _____

Have you ever filed an application with us in the past? _____
If yes when _____

Have you ever been employed with us in the past? _____
If yes when _____

Are you currently employed? _____ If yes can we contact your current employer? _____

Are you prevented from lawfully becoming employed in this country due to immigration or visa status? _____

What date would you be available to start work? _____

Are you available to work: Full time Part Time Temporary

Are you currently on "lay off" status and subject to recall? _____

Have you ever been convicted of a felony within the last seven years? _____
Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain _____

EDUCATION and ACTIVITIES:

High School: Grade completed _____ Name of High School: _____

If you are currently in high school, what grade are you in (at the time of completing this application)

Colleges or University: Name of College/Universities: _____

Degrees obtained and field of Study _____

Other Education related to position applied for (examples include American Red Cross (AMR) Lifeguard Training, AMR Water Safety Instructor etc.)

Indicate any foreign languages you can speak, read and/or write: _____

List professional, scholastic, community and or civic activities you are involved with and offices held.

You may exclude membership which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status.

REFERENCES:

Please give name, address and telephone number of three people who are not related to you

Employment Experience:

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status. For more space use a separate sheet of paper.

Employer:_____	Dates Employed_____
Address_____	Hourly Wage/Salary_____
City, State, Zip:_____	Phone #_____
Position/ Job Title:_____	Supervisor:_____
Work Performed:_____	
Reason for Leaving:_____	

Employer:_____	Dates Employed_____
Address_____	Hourly Wage/Salary_____
City, State, Zip:_____	Phone #_____
Position/ Job Title:_____	Supervisor:_____
Work Performed:_____	
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Employer:_____	Dates Employed_____
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Position/ Job Title:_____	Supervisor:_____
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Employer:_____	Dates Employed_____
Address_____	Hourly Wage/Salary_____
City, State, Zip:_____	Phone #_____
Position/ Job Title:_____	Supervisor:_____
Work Performed:_____	
Reason for Leaving:_____	

**Central Klickitat County Parks & Recreation District
SUPPLEMENTAL AQUATICS APPLICATION**

Certification Issuing Authority(Red Cross, Ellis etc) Date of Issue Expiration Date

CPR (professional rescuer) _____

Basic First Aid _____

Lifeguarding _____

Water Safety Instructor _____

Swim Coach Certification _____

Other: _____

Other: _____

**Please list your involvement in the following aquatic areas.
*For more space use separate sheet of paper.***

Swim team _____

Water Exercise Classes (# of classes taught) _____

Adaptive Aquatics and Therapy Exercise _____

Pool Maintenance (explain) _____

Lifeguarding (type of pool, etc.) _____

Did you take swim lessons, if yes what was the highest level you completed? _____

Have you ever taught swimming lessons, if yes what level is your favorite to teach? _____

Other swimming experiences? _____

Why do you want to be a lifeguard or swim instructor and why should the Central Klickitat County Park & Recreation District hire you?

APPLICANT'S STATEMENT:

I certify that answers given are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that the "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. Upon consideration for employment, I understand that the employer may secure a criminal background check. I understand, also, that the Employer may request a drug test as a condition of employment.

Signature of Applicant _____

Date _____