

# Crabapple Park & Pool APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION: _____ DATE: _____	<b>LAST</b>									
NAME: _____										
<div style="display: flex; justify-content: space-between;"> <span>LAST</span> <span>FIRST</span> <span>MIDDLE</span> </div>										
PERMANENT ADDRESS _____	<b>FIRST</b>									
<div style="display: flex; justify-content: space-between;"> <span>STREET</span> <span>CITY</span> <span>STATE</span> <span>ZIP</span> </div>										
PHONE NUMBER: (____) _____ SOC. SEC. #: _____										
CELL PHONE: (____) _____ BIRTH DATE: _____	<b>MIDDLE</b>									
<b>EMPLOYMENT DESIRED:</b> Position Desired:										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Manager _____</td> <td style="width: 20%;">Must be 21 years of age</td> </tr> <tr> <td>Assistant Manager _____</td> <td>21 years of age preferred</td> </tr> <tr> <td>Life Guard _____</td> <td>Must be 15 years of age</td> </tr> <tr> <td>Maintenance _____</td> <td>Must be 16 years of age</td> </tr> <tr> <td>Concession _____</td> <td>Must be 15 years of age</td> </tr> </table>			Manager _____	Must be 21 years of age	Assistant Manager _____	21 years of age preferred	Life Guard _____	Must be 15 years of age	Maintenance _____	Must be 16 years of age
Manager _____	Must be 21 years of age									
Assistant Manager _____	21 years of age preferred									
Life Guard _____	Must be 15 years of age									
Maintenance _____	Must be 16 years of age									
Concession _____	Must be 15 years of age									
Life Guards- attach copies (Both Sides) of your <u>CURRENT Certification, CPR certification and First Aid Certification</u> to this application.										
ARE YOU CURRENTLY EMPLOYED? Yes or No; If yes where _____										
Date you can start _____										
<b>EDUCATION:</b>										
SCHOOL	NAME AND LOCATION	Graduated	Major Subjects	GPA						
High SCHOOL		YES	NO							
COLLEGE										
OTHER (SPECIFY)										

**SPECIAL**

**TRAINING:** \_\_\_\_\_

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**ACTIVITIES: (CIVIC, ATHLETIC, ETC.)** \_\_\_\_\_

(EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, CREED, SEX, MARITAL STATUS, AGE, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS.)

**FORMER EMPLOYERS:** LIST YOUR LAST FOUR EMPLOYERS, STARTING WITH PRESENT OR MOST RECENT.

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM		\$		
TO		PER		
FROM		\$		
TO		PER		
FROM		\$		
TO		PER		
FROM		\$		
TO		PER		

**REFERENCES:** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

IN CASE OF EMERGENCY, NOTIFY: \_\_\_\_\_

NAME

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES, AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

*Mail Application to: Sewickley Township Parks & Recreation, 201 Highland Avenue, Herminie, PA 15637*

**APPLICANT - DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

NEATNESS: \_\_\_\_\_

ABILITY: \_\_\_\_\_

HIRED: \_\_\_\_\_ POSITION: \_\_\_\_\_ START DATE: \_\_\_\_\_ SALARY: \_\_\_\_\_

APPROVALS: 1. \_\_\_\_\_ 2. \_\_\_\_\_  
 EMPLOYMENT MANAGER General Manager