

PLEASE READ CAREFULLY

Thank you for your interest in our team at the Hillsboro Family Aquatic Center. **In order to have your application processed, you must thoroughly answer all questions on the application form. Applications filled out incompletely will not be considered.** While we encourage you to attach a resume, please note that a resume will not substitute for completing any portion of this application. All information will be treated confidentially.

The City of Hillsboro, an Equal Opportunity Employer, considers applicants for all positions without regard to race, color, religion, sex, age, national origin, disabled or veteran status, or other legally protected status.

Application for Employment

Date of Application: _____

Please select all the positions for which you are applying:

- Lifeguard
 Head Lifeguard
 Support Staff
 Food Service Mgr.

General Information—Please Print

Last Name		First	Middle	
Street Address			City	State Zip Code
Home Phone ()		Work Phone ()		Other Phone ()
Email Address:				
How did you learn about us?				
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Current/Previous Employee <input type="checkbox"/> Other _____				
Have you previously used any other names besides what is provided above? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify below:				
Have you ever filed an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give date: _____				
Are you now or have you ever been employed by the City of Hillsboro? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list the location, title, department, and dates below:				

Due to national regulations, the Hillsboro Family Aquatic Center requires that staff be at least 16 years old. Are you at least 16 years old? Yes No

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you eligible for employment in the United States? Yes No
 (If offered employment, you will be required to provide documentation to verify eligibility.)

Have you been convicted of a felony within the last 7 years? Yes No
 (Conviction will not necessarily disqualify an applicant from employment. If yes, please explain on back.)

All jobs are considered seasonal and part-time (10-35 hours per week).

How many hours per week do you wish to work this summer? _____ Hours

Applicant's Name _____

Education and Skills

Name of High School	City	State	Diploma/Equivalent? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of College/Technical School	City	State	Degree? <input type="checkbox"/> Yes <input type="checkbox"/> No
Major	Degree Earned	Years completed: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	
Other Training or Degrees School Name		City	State
Major	Degree Earned		

Computer Skills

List of ALL computer software in which you are proficient (including web design):
Please describe any computer skills, knowledge, and experience you have acquired:

Second Languages

Language	Fluency							
	Written				Spoken			
	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

Please list any other academic or technical skills relevant to the position for which you are applying:

Professional Licenses or Certifications

Title	Issuing State or Organization	Expiration Date

Applicant's Name _____

Employment History

List current/last employer **first**, include U.S. military service.

Employer		Dates Employed	
		From	To
Address			
Telephone Number(s)		Hourly Rate/Salary	
		Starting	Final
Job Title	Supervisor's Name & Title		
Reason for Leaving		Please describe work performed:	

Employer		Dates Employed	
		From	To
Address			
Telephone Number(s)		Hourly Rate/Salary	
		Starting	Final
Job Title	Supervisor's Name & Title		
Reason for Leaving		Please describe work performed:	

Employer		Dates Employed	
		From	To
Address			
Telephone Number(s)		Hourly Rate/Salary	
		Starting	Final
Job Title	Supervisor's Name & Title		
Reason for Leaving		Please describe work performed:	

Employer		Dates Employed	
		From	To
Address			
Telephone Number(s)		Hourly Rate/Salary	
		Starting	Final
Job Title	Supervisor's Name & Title		
Reason for Leaving		Please describe work performed:	

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

Applicant's Name _____

Additional Information

Summary of Aquatic Experience

NOTE: Some information may be the same as previous employment. Please complete both sections.

Position	Qty. of Time	Location	Supervisor	Phone
Lifeguard	____ summers			
Swim Team	____ seasons			
American Red Cross Swim Lesson Aide	____ classes			
ARC Swim Lesson Instructor	____ classes			

Personal Skills and Experience

Please describe your personal qualities and skills that you would contribute to our aquatic team.

<hr/> <hr/> <hr/> <hr/>

Personal References

People that can vouch for your character and work ethic (no family, individuals should be at least 21 years old).

Name	Relationship	Years Known	Phone

Applicant's Name _____

Applicant's Statement

I hereby certify that the facts set forth in this employment application 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.

I understand that false or misleading information of any kind or omission of facts called for on this application is a basis for dismissal regardless of when they are discovered.

I understand, also, that I am required to abide by all rules and regulations of the employer.

I understand that, unless otherwise defined by applicable law, any employment offered is for an indefinite duration, unless otherwise specified in writing, and is at-will, which means that either I or the City of Hillsboro may terminate my employment at any time with or without notice or cause.

I further understand that this "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 this organization.

Signature of Applicant: _____

Date: _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No Date: _____ Interviewer: _____

Remarks: _____

Employed Yes No Date of Employment _____ Dept. _____

Job Title _____ Hourly Rate/Salary _____

Approved by: _____
Name Title Date

NOTES _____
