

CITY OF MIDDLETOWN
RECREATION DEPARTMENT
AQUATICS APPLICATION

Office Use only:
Interviewed _____

Hired _____

Positions are available to those 16 years of age and older
Middletown Residents will receive priority consideration
If applying for summer employment ~ Applications are due by **Friday, March 11, 2022.**

INCLUDE A COPY OF YOUR CERTIFICATIONS (or your application will be returned to you).

Name:

_____ Cell phone: _____
First M.I. Last

Address:

_____ Street City State Zip

Other Phone: _____ Email address: _____

Will you be at least 16 years old at the start of employment: _____

POSITION(S) APPLYING FOR

Check desired positions:

- | | |
|---|---|
| <input type="checkbox"/> Facility Manager (experience required) | <input type="checkbox"/> Assistant Facility Manager (experience required) |
| <input type="checkbox"/> Senior Guard (experience required) | <input type="checkbox"/> Camp Swim Coordinator (experience required) |
| <input type="checkbox"/> Lifeguard | <input type="checkbox"/> Swim Instructor |

Facility Preference (please circle): Veteran's Pool Crystal Lake

Swim Suit Size _____

Please email nick.dionne@middletownct.gov with any specific scheduling requests.

EDUCATION

School Name

High School: _____

College: _____

Graduate School: _____

TRAINING OR SKILLS

Red Cross Lifeguard Training	Expiration date _____
Red Cross Waterfront Lifeguard Training	Expiration date _____
Red Cross Water Safety Instructor	Expiration date _____
Red Cross Head Lifeguard Training	Expiration date _____
Red Cross CPR:FPR	Expiration date _____
Red Cross First Aid	Expiration date _____
Other	_____

ALL POSITIONS SUBJECT TO BUDGETARY AND/OR PROGRAM CHANGES

Are you currently enrolled in a Red Cross Lifeguard Training Course? Yes No

If yes, when will you know if you have passed the course?

If you have taught swim lessons, please list where and what levels you have taught:

Employment History

Present/Last Employer: _____ Employment Dates: _____

Address: _____ Phone: _____
Street City State Zip

Job Title: _____ # of people supervised _____ Supervisor: _____

Reason for leaving: _____

Description of job duties: _____

Previous Employer: _____ Employment Dates: _____

Address: _____ Phone: _____
Street City State Zip

Job Title: _____ # of people supervised _____ Supervisor: _____

Reason for leaving: _____

Description of job duties: _____

Any additional employment history may be attached to this application

RELATED EXPERIENCE

List any other experiences, certifications, other activities
(Such as volunteer work, clubs, sports, special recognition, member of organizations, etc.)

I certify, under Middletown ordinance 74-2 (formerly Section 20-29), which is available upon request, that I have read this application and supporting information and that all information provided is true, correct, complete and not misleading to the best of my knowledge and belief. I understand that the City will rely upon this information in considering my application for employment and that if I knowingly make misstatements or omissions of facts I am subject to disqualification, dismissal from employment, or prosecution for false statement under the General Statutes; and, that the City, or its insurance company or other party by or on behalf of the City will not be responsible for any loss resulting from incorrect or incomplete information in the application or supporting material. I give consent for you to check with all persons and companies cited on the employment application, except my present employer if so noted, and release them from all liability for damage for providing the information. I will be residing at the summer address given herein during the course of employment. I have read the above statements and understand them.

Applicant Signature _____ **Date:** _____

Hiring Process: The hiring process shall include an application, an interview, a background investigation which may include finger printing and post offer drug screening. Failure to pass any facet of this process may result in disqualification or the withdrawal of any offer of employment. Applications submitted for employment may be public records. The City of Middletown cannot assume responsibility for the confidentiality of information provided on an employment application. I have read the above statements and understand them.

Signature: _____ **Date:** _____

This information will not be used in the selection process.
It is kept separate from your application and is not seen by anyone making the hiring decision.

VOLUNTARY DEMOGRAPHIC INFORMATION:

Name: _____

Sex (please check one) Male Female

Race or Ethnic Group (describe yourself in terms of one of the following groups):

White/Caucasian

Hispanic/Latino

Black/African American

American Native or Alaskan Native

Asian

Native Hawaiian or Other Pacific Islander

Two or More Races

(Persons who identify with two or more racial categories listed above)

Military Veteran Status:

Veteran of the United States Armed Forces

Disabled Veteran of the United States Armed Forces