

Northwood Park



Swim Club

General Information:

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Date of birth _____

Are you a member of Northwood Park Swim Club? (YES / NO)_____

Positions Applying For: (check all that apply)

_____ Pool Manager

_____ Swim Coach

_____ Lifeguard

_____ Lessons Instructor

_____ Pool House Cleaner

Emergency contact information:

Name of emergency contact: _____

Relationship: _____

Home phone: _____

Cell phone: _____

Lifeguard Availability:

_____ Full time (3-4 shifts a week)

_____ Substitute (1-2 shifts a week)

Beginning of Salem/Keizer Schools summer break: (check one)

_____ I am available PRIOR to summer break in the afternoon/evening.

_____ I am available AFTER school gets out.

End of Salem/Keizer Schools summer break: (check one)

_____ I am available UNTIL school starts.

_____ I am available AFTER school starting in the afternoon/evening.

Northwood Park Swim Club, LLC
PO BOX 20152
Keizer, OR 97307-0152
503-304-8851

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Certifications: For each of the following, please give the specific completion date for the most recent class. *(Please include copies of any certifications)*

Lifeguard

Certifying agency: _____

Date of completion: _____

Expiration: _____

Training location: _____

Swim Instructor *(Preference will be given to Red Cross trained instructors)*

Certifying agency: _____

Date of completion: _____

Expiration: _____

Training location: _____

CPR training

Certifying agency: _____

Date of completion: _____

Expiration: _____

Training location: _____

First Aid training

Certifying agency: _____

Date of completion: _____

Expiration: _____

Training location: _____

If you are not current in any of the above certifications, please list any classes you are signed up to take and the anticipated completion dates.

Course name

Expected Completion Date

_____	_____
_____	_____
_____	_____
_____	_____

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Community involvement and activities: Please list any activities important to you (school or otherwise) in which you are involved (i.e. academic, school clubs, sports teams, church, volunteer work, etc.).

Work experience: Please include the last 5 years

Company name: _____

Position: _____

Start date: _____ End date: _____

Hourly rate: _____

Company name: _____

Position: _____

Start date: _____ End date: _____

Hourly rate: _____

Company name: _____

Position: _____

Start date: _____ End date: _____

Hourly rate: _____

Education:

High School

Name of school: _____

Current year: _____ Number of years attended: _____

Did you graduate: (YES/NO) _____ Graduation date: _____

College

Name of school: _____

Current year: _____ Number of years attended: _____

Did you graduate: (YES/NO) _____ Graduation date: _____

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Time off request: Please list any known vacation times for which you would like to be considered. The dates you list below are **not guaranteed** and will be reviewed once staffing is finalized. If you are hired, you are **required to fill out a time off request form that has to be approved before time off is granted.**

Swim lesson session dates: If you are applying as a swim lesson instructor, you will be hired for specific sessions. **Time off will not be granted during any lesson sessions for which you are hired.** Indicate below which sessions you are committing to work:

- _____ Session 1 - June 15 - 26
- _____ Session 2 - July 6 - 17
- _____ Session 3 - July 20 - Jul 31
- _____ Session 4 - Aug 3 - 14
- _____ Session 5 - Aug 17 - 28

Parent / guardian signature for time off requests:

I have reviewed my child's requested time off dates and their commitment to work the above lesson sessions. **I understand that time off will not be granted during and lesson sessions for which they are hired.**

Parent / guardian signature: _____ Date: _____

References: Please list two references not related to you that are familiar with your character and work ethic. (i.e. teachers, coaches, previous employers.).

Name: _____
Phone number: _____
Relationship: _____

Name: _____
Phone number: _____
Relationship: _____

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Acknowledgements: Please read carefully and initial.

- I acknowledge that my employment with Northwood Park Swim Club will be 'at-will' and that either Northwood Park Swim Club or I reserve the right to terminate employment at any time, with or without cause.
- I understand that Northwood Park Swim Club is open 7 days a week including holidays. I agree to work my scheduled hours, including those that fall on holidays, once the schedule is posted unless a time off request or prior shift replacement has been approved by the Manager in writing.
- I authorize Northwood Park Swim Club to contact previous employers regarding my previous employment. I also authorize Northwood Park Swim Club to release information regarding my job performance to a prospective employer, unless otherwise stated.

I agree to the above acknowledgements: _____ (initial)

Agreement: I hereby affirm that the information I have given in this application is true and correct to the best of my knowledge.

Signature

Printed Name

Date

Completed applications may be accepted by a Northwood Park Swim Club Board Member or mailed to:

Northwood Park Swim Club
PO Box 20152
Keizer, OR 97307-0152

All applications must be postmarked by the application due date listed on the applicable job announcements.

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