

City of Roswell - Recreation Department

Application Supplement for Cahoon Pool

PLEASE PRINT OR TYPE ALL INFORMATION

Name: _____
(Last Name) (First Name) (MI)
Social Security #: _____ Phone: [] _____
Address: _____ City: _____
State: _____ Zip: _____

LIST CERTIFICATES YOU HOLD

Note: You must provide copies of certifications indicated below.

- | | | | |
|--------------------------|-------------------------|-------------------|-------------|
| <input type="checkbox"/> | Water Safety Instructor | Instructor: _____ | Date: _____ |
| <input type="checkbox"/> | Lifeguard Training | Instructor: _____ | Date: _____ |
| <input type="checkbox"/> | CPR | Instructor: _____ | Date: _____ |
| <input type="checkbox"/> | First Aid | Instructor: _____ | Date: _____ |
| <input type="checkbox"/> | Other _____ | Instructor: _____ | Date: _____ |

TYPE OF POSITION DESIRED

PLEASE LIST ALL TYPES OF AQUATIC EXPERIENCE YOU HAVE HAD

WHAT OTHER WORK OR JOB EXPERIENCES HAVE YOU HAD THAT MIGHT BENEFIT YOU IN THE DESIRED POSITION

WILL YOU BE ABLE TO WORK SIX DAYS A WEEK DURING THE POOL SEASON?

- Yes
- No — please list the date(s) that you will need to leave: _____

DO YOU PLAN ON TAKING ANY SUMMER SCHOOL CLASSES OR WILL YOU BE TAKING A VACATION DURING THE SUMMER?

- Yes — when and for how long: _____
- No

OTHER INFORMATION