

Positions

Please check position(s) you are interested in

*Minimum age requirements listed in parenthesis

<input type="checkbox"/> Concessions	(16 years)	18+ Preferred
<input type="checkbox"/> Customer Service/Front De	(18 years)	21+ Preferred
<input type="checkbox"/> Daily Maintenance	(16 years)	18+ Preferred
<input type="checkbox"/> Lifeguard	(15 years)	Must have current lifeguarding certification
<input type="checkbox"/> Slide Attendant	(16 years)	
<input type="checkbox"/> Swim Instructor	(15 years)	Lifeguard certification preferred
<input type="checkbox"/> Summer Camp Counselor	(16 years)	18+ Preferred

Certifications/Qualifications

Summarize your special skills or qualifications/certifications:

Summer Commitments:

Please list days and/or times that you will be unable to work due to other commitments (family vacation, weddings, summer camps, summer school, etc.) Please understand that individuals with summer conflicts will receive fewer scheduled weekly work hours. You are required to find a sub for any AND ALL days off. PLEASE NOTE: if you DO NOT have a sub, you are expected to work your shift(s). This includes being ill.

Questions

1. Why are you seeking employment at Spring Lake Pool?
2. What will you bring to enhance and improve Spring Lake facilities, programs, and staff?
3. What personal & professional qualities do you possess that will make you an asset to our staff?

References

List three personal references who are not relatives and/or current employees of Flagg-Rochelle Park District. High School students must list at least one educator (teacher, counselor, administrator, coach.)

(Name)	(Address)	(Telephone)	(Relationship)

Employment

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____

Company: _____ Address: _____

Supervisor: _____ Phone #: _____

Responsibilities: _____

Starting Salary & Title: _____ Ending Salary & Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____

Company: _____ Address: _____

Supervisor: _____ Phone #: _____

Responsibilities: _____

Starting Salary & Title: _____ Ending Salary & Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

Spring Lake Pool Hours

Monday-Thursday: 12:30PM-5:30PM
 Friday: 12:30PM-7:00PM
 Saturday & Sunday: 12:00PM-4:30PM
 Adult Swim: 5:30PM-7:00PM (Monday-Thursday)

Staff Hours

Maintenance Staff: Monday-Thursday 5:30AM-9:00AM Friday 7:30AM-11:30AM Saturday & Sunday 8:00AM-11:00AM

Guard Staff: Monday-Thursday 12:15PM-5:45PM Friday 12:00PM-7:15PM Saturday & Sunday 11:45AM-4:45PM
***PLUS: Party Rentals Saturday & Sunday only *Guards MUST attend weekly drills Saturday OR Sunday 11:15AM**

CSR/Front Desk: Monday-Thursday 12:15PM-5:45PM Friday 12:15PM-7:00PM Saturday & Sunday 11:45AM-4:45PM

Concessions Staff: Monday-Thursday 12:45PM-5:45PM Friday 12:45PM-7:00PM Saturday & Sunday 12:15PM-4:45PM

Preferred Days

Please mark which days you prefer to work with an "X"
 Either a Saturday or Sunday is required

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

T-Shirt Size:

Swimsuit Size: (lifeguard only)

Short Size: (lifeguard only)

Swimming Lessons for Summer 2018

Please select 2 sessions. Schedules will be dependent on class size.

Swim Lesson Staff Hours are 10:15am-12:00pm Class Times are 10:35-11:05am and 11:15-11:50am Monday-Thursday

_____ Session #1: June 18-June 28

_____ Session #2: July 9-July 19

_____ Session #3: July 23-August 2

Private Swim Lessons will be held in the evenings: 6-6:30pm Monday-Wednesday

Important Information

It is critical that you complete this application **NEATLY & THOROUGHLY**. Individuals who submit *incomplete* or *messy* applications will **NOT** be considered for employment.

- Qualified candidates will be contacted by phone, text, or email to determine an interview time & date.
- All persons who interview will be notified **on or after April 13th regarding employment status** for the summer of 2018 pending any certification(s)
- ALL staff members are responsible for working hours as assigned throughout the course of the summer.
- All requests for time off must be approved by the manager. Individuals granted approval for requested time off **MUST** secure a substitute and **MUST** be willing to substitute an equal (or greater) number of hours for other staff members. If a substitute cannot be secured, employees are required to work hours as assigned.

Questions? Comments? Concerns?

Please Contact: Michelle Antolik (815) 501-0776 or mantolik68@yahoo.com
or Maureen Stevens (815) 562-7813 or mstevens@rochelleparkdistrict.org

Applicant Waiver

All job applicants must sign and submit with application form

I hereby certify that the information hereunder is correct to the best of my knowledge and understand that falsification of this information is grounds for refusal to hire or, if hired, dismissal.

I hereby authorize any of the persons or organizations listed in my application to give all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and release all such parties from all liability that may result from furnishing such information to you. I authorize the Flagg-Rochelle Community Park District to request and receive such information.

In consideration for my employment and my being considered for employment by the Flagg-Rochelle Community Park District, I agree to adhere to the rules and regulations of the company and hereby acknowledge that these rules and regulations may be changed by the Flagg-Rochelle Community Park District at any time, at the company's sole option and without any prior notice. In addition, if such is made, may be withdrawn, with or without prior notice, at any time, at the option of either the company or myself.

I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to assure or make some other personnel move, either prior to commencement of employment or after I have become employed, or to assure any benefits or terms and conditions of employment, or to make any agreement, that is contrary to the foregoing.

I hereby acknowledge that I have been advised that this application will remain active for no more than 90 days from the date it was signed.

Applicant: _____ Date: _____

Company
Representative: _____ Date: _____