



Application for Employment

We welcome your interest in City service and we consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. **Any false, incomplete or incorrect statements on this application form may result in disqualification of the applicant or dismissal from employment.**

Please Print

Position(s) Applied For: _____ Date of Application: _____

How did you learn about this recruitment? Please specify: ☐ Newspaper advertising ☐ Word of Mouth
☐ City Web Page ☐ Friend/Relative ☐ Walk-In Other _____

| Last Name | First Name | Middle Name | | |
|---------------------|------------|------------------------|-------|----------|
| Address Number | Street | City | State | ZIP Code |
| Telephone Number(s) | E-Mail | Social Security Number | | |

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

Have you ever filed an application with us before? ☐ Yes ☐ No
If yes, give date _____

Have you ever been employed with us before? ☐ Yes ☐ No
If yes, give date _____

Are you currently employed? ☐ Yes ☐ No

May we contact your current employer? ☐ Yes ☐ No

Are you legally eligible for employment in this country?
(Proof of citizenship or immigration status will be required upon employment) ☐ Yes ☐ No

Date available for work _____/_____/_____

Type of employment desired ☐ Full-Time ☐ Part-Time ☐ Seasonal ☐ Temporary

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

If your position requires you to drive, do you have a valid California Driver's license? ☐ Yes ☐ No

NOTE TO APPLICANTS: Please do not respond to this question unless you have been informed about the requirements of the job for which you are applying.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied?
☐ Yes ☐ No

Educational Background

| Name/Location | Years Completed | Graduate? | Course of Study | Degree? |
|-----------------------|-----------------|-----------|-----------------|---------|
| High School | | | | |
| Undergraduate College | | | | |
| Graduate/Professional | | | | |
| Other | | | | |

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

| | | | |
|--------------------|----------------|-------------|----------------|
| Employer | Employed From: | Employed To | Work Performed |
| Address | | | |
| Job Title | Supervisor | | |
| Reason for Leaving | | | |
| Employer | Employed From | Employed To | Work Performed |
| Address | | | |
| Job Title | Supervisor | | |
| Reason for Leaving | | | |
| Employer | Employed From | Employed To | Work Performed |
| Address | | | |
| Job Title | Supervisor | | |
| Reason for Leaving | | | |

If you need additional space, please continue on a separate sheet of paper.

Indicate any foreign language you can speak, read and/or write

| | FLUENT | GOOD | FAIR |
|-------|--------|------|------|
| SPEAK | | | |
| READ | | | |
| WRITE | | | |

The information provided in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in dismissal.

Date: _____ Signature: _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Please advise us if you need assistance or accommodation in the application/hiring process.

WE ARE PROUD TO BE A DRUG FREE WORKPLACE

Screening tests for drug use may be required as a condition of employment.



CITY OF PLACERVILLE COMMUNITY SERVICES DEPARTMENT

549 Main Street, Placerville, CA 95667

(530) 642-5232 FAX: (530) 642-5236

2022 AQUATICS SUPPLEMENTAL APPLICATION

Please complete this supplemental application along with the City Application

Name: _____

Primary Phone: _____

Other Phone: _____

Please check ALL of the positions that you are interested in applying for this season:

- ☐ Lifeguard (*Lifeguards also have the option of assisting with swimming lessons. If you are hired as a lifeguard, are interested in working as a Swim Lesson Aide?* ☐ Yes ☐ No ☐ Not sure)
- ☐ Swim Lesson Instructor
- ☐ Assistant Pool Manager (Please attach résumé and two letters of recommendation.)
- ☐ Pool Manager (Please attach résumé and two letters of recommendation.)
- ☐ Aquatics Coordinator (Please attach résumé and two letters of recommendation.)

CERTIFICATIONS Please indicate your current certifications and/or your plans to become certified:

1. **Lifeguard/First Aid/CPR/AED Certification (check one)**

- ☐ I already have this certification and have attached a copy
- ☐ I don't have this certification yet, but am planning to take the following course:

Class dates and location: _____

2. **Title 22 First Aid (Advanced First Aid for First Responders in California) (check one)**

- ☐ I already have this certification and have attached a copy
- ☐ I don't have this certification yet, but am planning to take the following course:

Class dates and location: _____

SWIMMING ABILITY & EXPERIENCE

1. Please list your swimming background and experience: _____

2. The following are prerequisites for the Red Cross Lifeguard Training Course. Please indicate your ability to perform these skills:

| PREREQUISITE SKILLS | I can perform this skill | I cannot perform this skill | I don't know if I can perform this skill |
|---|--------------------------|-----------------------------|--|
| 1. Swim 300 yards using freestyle and breaststroke | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Tread water for 2 minutes with legs only | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Within 1 minute, 40 seconds: swim 20 yards, surface dive 8 feet, and retrieve a 10 pound diving brick, bring to the surface and return to the starting point, then exit the water without using the ladder | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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SUMMER AVAILABILITY (May 31st -September 5, 2022)

1. How many hours per week would you like this summer?

☐ Up to 15

☐ 15-25

☐ 25-35

2. Are you available to attend Pre-Season Training the week of May 31st –June 3rd?

☐ Yes, I am available all week

☐ I am still in school, but can attend after school that week

☐ No, I am not available that week (please explain): _____

3. Time Off: Please list all time-off needs you will have for the season. Keep in mind, the pool is open 7 days a week from 7:00 AM—8:30 PM. If you don't know exact dates or times yet, please just provide an estimate.

School: _____

Vacation: _____

Sports: _____

Camp: _____

Second Job: _____

Other: _____

4. My last available day to work during Season is: _____

Thank you for your interest in working at the Placerville Aquatic Center!
Please return this supplemental application along with the City Application.