

# 2018 Employment Application City of Heath Municipal Water Park



Return completed form to:  
City of Heath  
1287 Hebron Road  
Heath, Ohio 43056  
740/522.1420 x 202

[www.heathohio.gov](http://www.heathohio.gov)

City of Progress \* Citizens with Pride

Position applying for:

- Water Park Attendant/Lifeguard       Concession/Maintenance       Maintenance - A.M.  
 Lifeguard       Concession Cashier      (limited hours in AM)  
 Operations/Reading (must be 18 years old)

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Street/Apt # City/State/Zip

Email Address: \_\_\_\_\_

Cellular #: (\_\_\_\_) \_\_\_\_\_ Alternate #: (\_\_\_\_) \_\_\_\_\_ Are you age 16 or older?  Yes  No

\* **Some water park positions are age specific according to law \*Work permits are required of applicants under the age of 16.**

Social Security #: \_\_\_\_\_ Do you have legal authorization to work in the U.S.?  Yes  No

Do you have relatives currently employed by the City of Heath?  Yes  No

If yes, who? \_\_\_\_\_ Relationship: \_\_\_\_\_

Do you have a valid Ohio Driver's License?  Yes  No If yes, DL# \_\_\_\_\_

## Education

Name of High School/College: \_\_\_\_\_

What grade will you enter in fall of 2018 (please circle one): 9 10 11 12 Post/Secondary

## Other

Date available to begin work: \_\_\_\_\_ Date no longer available: \_\_\_\_\_

I request to work:  less than 20 hours per week  over 20 hours per week

Will you be requesting time off between June 1<sup>st</sup> and September 1<sup>st</sup>?  Yes  No

If yes, when? \_\_\_\_\_

Will you be available to work in August?  Yes  No

Do you participate in a Fall sport that may interfere with your ability to work in August (i.e. football, volleyball, soccer, etc.)?  Yes  No

**Answer the following questions ONLY if you are applying for a lifeguard position:**

**Certification** (please check all that apply):

Lifeguarding (this is NOT advanced lifesaving)     Water Safety Instructor     CPR

If you are *not* a certified lifeguard applying for this position, can you attend the classes offered at the Heath City Water Park to obtain certification in: **May?**  Yes  No    **June?**  Yes  No

Have you taught swimming before?  Yes  No    If yes, where?: \_\_\_\_\_

Will you teach swimming lessons this year?  Yes  No

If yes, check the sessions you will teach:  June a.m.     June p.m.     July a.m.

Can you work any time between the hours of 12:00 p.m. and 9:00 p.m. every day?  Yes  No

If no, please specify available hours: \_\_\_\_\_

*\* Due to Water Park requirements, if you are 15 years old with lifeguard certification, you will be assigned the duties of water park attendant/maintenance/concession stand and used as a substitute for lifeguarding in all areas except the slides.*

**A copy of lifeguard and/or WSI certification cards MUST be attached to this application.**

**Employment History**

If you need more room, use a separate sheet of paper.

A. Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Employment date from: month \_\_\_\_\_ year \_\_\_\_\_ to month \_\_\_\_\_ year \_\_\_\_\_

Your Title: \_\_\_\_\_ Your Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact:  Yes  No

B. Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Employment date from: month \_\_\_\_\_ year \_\_\_\_\_ to month \_\_\_\_\_ year \_\_\_\_\_

Your Title: \_\_\_\_\_ Your Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact:  Yes  No

C. Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Employment date from: month \_\_\_\_\_ year \_\_\_\_\_ to month \_\_\_\_\_ year \_\_\_\_\_

Your Title: \_\_\_\_\_ Your Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact:  Yes  No

**References**

Do *not* list relatives or past employers previously listed in “Employment History”.

Name	Address	Daytime Phone #
1. _____	_____	(       )       - _____
2. _____	_____	(       )       - _____
3. _____	_____	(       )       - _____

Please list any additional knowledge, skills, and abilities not previously discussed which may be of a qualifying nature or helpful to you in establishing your eligibility. Include any projects, hobbies, community or volunteer activities, etc.

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**Attention: Read the following statement before signing this document**

As an applicant for employment with the City of Heath, Ohio, I understand and agree that the City may make a thorough investigation of my past employment and activities. This may include, but is not limited to, a motor vehicle operator’s license inquiry and police investigation. I hereby release you, your organization, or others from any liability or damages, which may result from exchange of the information requested.

I also certify that all statements contained herein or at any step of the employment process are true, complete, and correct to the best of my knowledge. I understand a false answer may be grounds for dismissal from employment of the City of Heath.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***An Equal Opportunity Employer***