

Employment Application for Summer 2018

Mail Completed Application (by May 15) to:

Employment GHC
Gateway Heights Club
PO Box 284
MONROEVILLE, PA 15146

You may also scan and email this application and your certifications to:
jobs@gatewayheights.org

Application Date: _____

Last Name _____ MI ____ First Name _____

Address _____

Phone # _____ Birth Date _____ SSN _____

High School (Y/N) _____ College (Y/N) _____ Have you worked at GHC before (Y/N)? _____

Position Desired

___ Pool Manager

___ Swim Coach

___ Lifeguard

___ Concession (Volunteer)

___ Club Assistant

Manager Qualifications

___ Certified Pool Operator (or equivalent) – Expires _____

If not yet certified or certification is expired, when do you expect to complete current certification? _____

___ PA Pesticide Applicator License – Expires _____

If not yet certified or certification is expired, when do you expect to complete current certification? _____

Aquatic Qualifications

___ Lifeguard Certification – Expires _____

If not yet certified or certification is expired, when do you expect to complete current certification? _____

___ CPR Certification – Expires _____

If not yet certified or certification is expired, when do you expect to complete current certification? _____

___ First Aid – Expires _____

If not yet certified or certification is expired, when do you expect to complete current certification? _____

___ Water Safety Instructor Certification – Expires _____

If not yet certified or certification is expired, when do you expect to complete current certification? _____

Other Relevant Certifications (Please List)

Certification: _____ Expires _____

Certification: _____ Expires _____

Certification: _____ Expires _____

Please describe your previous experiences that are relevant to the position for which you are applying: (For instance, if you have worked as a Lifeguard in the past, please note the dates and places of employment).

List below any other aquatic experience (competitive swimming, swim instructor, etc.):

Other Work Experience List below any other relevant employment or work experience within the past last three years:

Special Considerations

Are you going on a family vacation? Yes ____ No ____ Number of weeks: ____

Will you be attending summer school? Yes ____ No ____

Will you require any other personal time off that you know of in advance? ____

If yes to any of the above, please describe any special scheduling requests:

(Please note that due to the nature of these positions, scheduling needs will be taken into consideration when selecting qualified candidates to fill open positions. Also note that excessive unexpected requests for time-off may be cause for termination. Thank you in advance for your understanding.)

I can start as early as (date of availability): _____

I will be unable to work after (date of termination): _____

Exceptions (if you can work part-time hours at the beginning or end of summer please note):

References (Please include Name, Title, Email Address and Phone Number)

1. _____

2. _____

***** Attach to this form a copy of all certifications. *****

You may also attach a resume or expanded description of prior work history.