

# WHITE MEADOW LAKE PROPERTY OWNERS ASSOCIATION WATERFRONT STAFF APPLICATION

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
 SOC. SEC. # \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 BATHING SUIT SIZE: \_\_\_\_\_ (MEN: M - L - XL ; WOMEN: 32, 34, 36, 38, ETC.)

<b><u>CERTIFICATIONS</u></b> (AMERICAN RED CROSS ONLY)	<b><u>DATE OF COURSE</u></b>	<b><u>EXPIRES</u></b>
• LIFEGUARD TRAINING *	_____	_____
• CPR FOR THE PROFESSIONAL RESCUER *	_____	_____
• WATERFRONT LIFEGUARDING	_____	_____
• WATER SAFETY INSTRUCTOR	_____	_____
• BOATING CERTIFICATION / LICENSE	_____	_____
• AED _____	_____	_____
• OTHER _____	_____	_____

\* VALID CERTIFICATION IS REQUIRED FOR EMPLOYMENT  
(individuals will not be interviewed unless they are certified)

**EXPERIENCE** (RELATED WORK EXPERIENCE ONLY):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**REFERENCES** (NO RELATIVES, PREFERABLY PREVIOUS EMPLOYEES):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**OTHER RELATED ACCOMPLISHMENTS** (SWIM TEAM, SWIMMING LESSONS, ETC.):

\_\_\_\_\_

\_\_\_\_\_

**INDICATE PREFERENCES:**

\_\_\_\_\_ I AM AVAILABLE FOR FULL-TIME EMPLOYMENT FROM MEMORIAL DAY TO LABOR DAY  
(You won't be taking more than 10 consecutive days off during the season)

\_\_\_\_\_ I WOULD LIKE TO WORK, BUT CAN ONLY WORK THE FOLLOWING HOURS, DAYS, ETC.:  
\_\_\_\_\_

\_\_\_\_\_ I WOULD BE AVAILABLE TO FILL IN AS NEEDED (SUBSTITUTE)

\_\_\_\_\_ I WOULD LIKE TO WORK PATROL BOAT AS NEEDED

**NO PERSON WILL BE ALLOWED TO WORK UNLESS ALL THEIR PAPERWORK, COPIES OF CERTIFICATIONS AND WORKING PAPERS (necessary for applicants under 18 years of age) ARE ON FILE WITH THE POA OFFICE BEFORE EMPLOYMENT BEGINS.**

The information I have supplied to the questions on this application is truthful and accurate to the best of my knowledge.

\_\_\_\_\_  
SIGNATURE \_\_\_\_\_  
DATE