

# Hoffman Aquatic Center

## APPLICATION FOR EMPLOYMENT

### (Returning & New Employees)

### LIFEGUARDS \* ADMISSIONS/ATTENDANTS

**PLEASE FILL OUT AND RETURN BY May 2, 2025:**

Applicant's name: \_\_\_\_\_ Today's date \_\_\_\_\_

Date of birth \_\_\_\_\_ Age \_\_\_\_\_

Permanent Address \_\_\_\_\_

Cell phone# \_\_\_\_\_ E-mail address \_\_\_\_\_

Position applying for (check all that apply) Head Lifeguard \_\_\_\_\_ Lifeguard \_\_\_\_\_ Admissions \_\_\_\_\_

# of hours **willing** to work: 32hrs+/week \_\_\_\_\_ 20-32 hours/week \_\_\_\_\_ Under 20 hours/week \_\_\_\_\_

High School attended \_\_\_\_\_ H.S. Graduation date \_\_\_\_\_

College attending or will attend \_\_\_\_\_

First day available to work \_\_\_\_\_ Last day available to work in summer 2025 \_\_\_\_\_

List past work experience: \_\_\_\_\_

List any days of the week or dates you cannot work. Also list any vacations planned: \_\_\_\_\_

Activities you are currently involved in this spring: \_\_\_\_\_

Number of years worked at Hoffman Aquatic: \_\_\_\_\_

**PLEASE FILL OUT BACK SIDE**

Lifeguard Certification Date Received\_\_\_\_\_ Expiration Date\_\_\_\_\_

CPR Certification Date Received\_\_\_\_\_ Expiration Date\_\_\_\_\_

Other Certifications Held & Date\_\_\_\_\_

**Check for your size for suit (lifeguards ) and shirt (everyone) – Parks & Rec will provide one of each – you can purchase a second suit (about \$50) and/or t-shirt (about \$15)**

Lifeguard-swimsuit size:

Male:

XL(40)\_\_\_\_\_ L(38)\_\_\_\_\_ M(36)\_\_\_\_\_ S(34)\_\_\_\_\_ other\_\_\_\_\_

Female:

One Piece (44)\_\_\_\_\_ (42)\_\_\_\_\_ (40)\_\_\_\_\_ (38)\_\_\_\_\_ (36)\_\_\_\_\_ (34)\_\_\_\_\_ (order larger they run tight & small)

Two Piece XL\_\_\_\_\_ L\_\_\_\_\_ M\_\_\_\_\_ S\_\_\_\_\_

Lifeguard T-shirt Size: XXL\_\_\_\_\_ XL\_\_\_\_\_ L\_\_\_\_\_ M\_\_\_\_\_ S\_\_\_\_\_

Admissions/Attendant Worker T-shirt Size: XXL\_\_\_\_\_ XL\_\_\_\_\_ L\_\_\_\_\_ M\_\_\_\_\_ S\_\_\_\_\_

**REFERENCES:**

Name	Phone	Relationship
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1. \_\_\_\_\_

2. \_\_\_\_\_

Signature\_\_\_\_\_

Date\_\_\_\_\_

**Return completed application to City Hall (101 S 2<sup>nd</sup> St) or email at  
brf.rec@blackriverfalls.wi.gov**