

Mount Rainier Pool APPLICATION FOR EMPLOYMENT

Governed by the Des Moines Pool Metropolitan Park District

The Mount Rainier Pool/Des Moines Pool Metropolitan Park District is an Equal Opportunity Employer and does not unlawfully discriminate on the basis of race, sex, age, color, sexual orientation, religion, national origin, marital status, genetic information, veteran's status, disability, or any other basis prohibited by federal, state or local law.

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

- A separate original application must be completed for EACH POSITION for which you are applying. We require the original application even if you fax your application to us. *Complete the application thoroughly*.
- Your answers determine whether you will be considered. We will not accept "See Resume." Resumes may be used to supplement an application but may not be used in lieu of completing the application form.
- Applications that are incomplete will not be accepted.
- Be sure to sign your name and enter the date you signed it where the application asks. Original signature is required.
- Keep a copy of your application and any attachments because what you submit will not be returned.
- Only applicants who are interviewed will receive notice of selection.
- If you require a reasonable accommodation to complete the employment application process, please provide all information requested by printing in ink or typing. Use the 'TAB' key to move through the document.
- Do not submit a photo of yourself.

| Name (Last) | (First) | | (Middle Initial) | (Contact Telephone) | |
|---------------------------|---------|--|------------------|---------------------|-------------------|
| | | | | | () - |
| Address (Mailing Address) | (City) | | (State) | (Zip) | (Other Telephone) |
| | | | | | () - |
| E-Mail Address | | Are you authorized to work in the U.S. for DMPMPD? Yes No (Note: If hired, form I-9, Employment Eligibility Verification, must be completed at the start of employment). | | | |

POSITION

| Position or Type of Employment Desired | Will Accept: | Shift: |
|---|----------------|-----------|
| | Part-Time | Morning |
| | Full-Time | Afternoon |
| Are you able to per the essential job functions of the job you are applying for, with | Temporary | Evening |
| or without reasonable accommodation? Yes No | | Open |
| | | |
| | | |
| | | |
| Salary Desired | Date Available | |
| | | |
| | | |

EDUCATION AND TRAINING

| High School Graduate or General Ed | | s No | | | |
|------------------------------------|-----------------------|----------------|----------|--------|---------------------|
| High School, Business, Militar | y (Most recent first) | | | | |
| Name and Location | Type of Hours | Credits Earned | Graduate | Degree | Major or Subject |
| | Quarter | | Yes | | |
| | Semester | | No | | |
| | Quarter | | Yes | | |
| | Semester | | No | | |
| | Quarter | | Yes | | |
| | Semester | | No | | |

MINIMUM AGE REQUIREMENT

Minimum age requirements for lifeguarding is 15 years old and for swim lesson instructor is 16 years old.

CURRENT CERTIFICATIONS

| Lifeguard Certification | Number | Where Issued | |
|--|--------|--------------|--|
| ARC/AED/CPR Certifications | Number | Where Issued | |
| Water Safety Certification | Number | Where Issued | |
| Lifeguard Instructor Certification | Number | Where Issued | |
| Water Safety Instructor Certification | Number | Where Issued | |
| Pool Operator Certification | Number | Where Issued | |
| Other Certificates | Number | Where Issued | |
| Languages Read, Written or Spoken Other Than English | | | |

VETERAN INFORMATION

| Branch of Service | Date of Entry | Date of Discharge |
|-------------------|---------------|-------------------|
| | | |
| | | |

CRIMINAL CONVICTIONS

The Des Moines Pool Metropolitan Park District is mindful of its obligation to employ qualified persons and its entitlement under law to consider an applicant's conviction record as it relates to job performance. A conviction record will not disqualify you for employment unless such record would reasonably affect your fitness for the job for which you have applied. All job positions for DMPMPD fall under the Child and Adult Abuse Information Act. Have you been convicted of a felony or released from prison within the last ten (10) years, or have been convicted of a misdemeanor other than minor traffic offenses within the past three (3) years? Yes No

| yes, please provide details regarding the crime and sentence or fine imposed: | |
|---|--|
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| | |

WORK EXPERIENCE (Most Recent First) Include voluntary work and military experience.

| Employer | Telephone Number () - | Hours Per Week |
|---|--------------------------------|--|
| Address | | |
| Job Title | Number of Employees Supervised | Supervisor/Title |
| Specific Duties | | |
| | | |
| | | How long did you work at this employer (Years and Months)? |
| | | |
| Reason for Leaving | May we contact this en | ployer? Yes No |
| Are you currently employed by this employer? Yes No | · | |

| Employer | Telephone Number () - | Hours Per Week |
|--------------------|--------------------------------|---|
| Address | | |
| Job Title | Number of Employees Supervised | Supervisor/Title |
| Specific Duties | | |
| | | How long did you work at this employer (Years and Months)? |
| Reason for Leaving | May we contact this emp | oloyer? Yes No |

| Employer | Telephone Number () - | Hours Per Week |
|--------------------|--------------------------------|--|
| Address | I | |
| Job Title | Number of Employees Supervised | Supervisor/Title |
| Specific Duties | | - |
| | | |
| | | How long did you work at this employer (Years and Months)? |
| | | |
| Reason for Leaving | May we contact this emp | loyer? Yes No |

OTHER PROFESSIONAL/VOLUNTEER POSITIONS

| Position | Employer | Length of Employment/Volunteer |
|----------|----------|--------------------------------|
| | | Term |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

To the best of my knowledge, the information herein is true and complete. I have read the Job Announcement and Job Description, and I can perform the essential functions of the position for which I am applying, with or without reasonable accommodation. I understand if I am applying for a position in which I will or may have unsupervised access to children, developmentally disabled persons, or vulnerable adults, the Des Moines Pool Metropolitan Park District is authorized to complete a thorough background check pursuant to the Child/Adult Abuse Information Act. As part of its background investigation, the District may obtain a consumer report from a consumer reporting agency if your credit information is considered job related. I authorize investigation of all statements in this application.

I certify the information contained in this application is true, correct, and complete. I understand that false statements reported on this application may be considered sufficient cause for disqualification of this application or, if employed, for dismissal.

Signature: Date: