For Office Use Only
Employee ID#_____

CITY OF KNOXVILLE
Parks and Recreation
knoxvilletn.gov/recreation

AQUATICS SUMMER APPLICATION 2020

Pool Applying For: ☐ **Adaptive** ☐ **Ed Cothren** ☐ **Elmer Brine** ☐ **Inskip**

Position Applying For: ☐ **Assistant Pool Manager** ☐ **Head Lifeguard** ☐ **Lifeguard** ☐ **WSI**

☐ **Water Exercise Instructor** ☐ **Concessions Worker** ☐ **Cashier** ☐ **Security**

Full Name: _____
First **Middle** **Last**

Address: _____
Street **Apt. #** **City** **State** **Zip Code**

Contact Information: (home phone) _____ - _____ - _____ **(cell phone)** _____ - _____ - _____

Email Address: _____

What is the best way to contact you? ☐ **Phone call** ☐ **Text** ☐ **Email**

Will you be 18 years old or older by May 1, 2020? ☐ **Yes** ☐ **No**

If no, will you be at least 15 years old by May 1, 2020? ☐ **Yes** ☐ **No**

Highest level of education completed: _____

Have you ever been convicted of a felony? ☐ **Yes** ☐ **No** **If yes, please explain.** _____

_____

Have you ever worked for the Parks and Recreation Department before? ☐ **Yes** ☐ **No**

If yes, when, where and in what position? _____

What is your aquatics experience? _____

Where did you work? _____**Who was your lifeguard instructor?** _____

Select any American Red Cross certifications below that you have:

☐ **Certified Lifeguard** ☐ **First Aid/CPR/AED** ☐ **LGI** ☐ **WSI**

Adult T-Shirt Size: ☐ **S** ☐ **M** ☐ **L** ☐ **XL** ☐ **XXL** ☐ **XXXL** **Swim Suit Size:** _____

In case of emergency, notify:

Name: _____ **Relationship:** _____ **Phone Number:** _____ - _____ - _____

By signing this application, I hereby agree that the information provided is complete and accurate. I also understand that by completing and signing this application, it does not in any way guarantee me a position with the City of Knoxville Parks and Recreation Department.

Signature of Applicant: _____ **Date:** _____