

**WATERLOO LEISURE SERVICES COMMISSION**  
**APPLICATION FOR**  
**TEMPORARY EMPLOYMENT**  
**YOUTH AND ADULT SPORTS/RECREATION POSITIONS**

Please complete the application in its entirety. Circle yes/no where indicated. If information required is not applicable, please use N/A in that blank. Please make copies (keep your originals) of all materials that you submit.

Application Date:  Date Available:

Name:  Social Security #:

Address:  City/State/Zip:

Home Phone:  Work Phone:

Position(s) for which you are applying:

With or without reasonable accommodation (modification) are you able to perform the essential job functions required of this position? **Yes No**

If no, please describe:

Have you ever been convicted of a felony or misdemeanor (excluding traffic violations)? **Yes No**

If yes, please provide date, incident, city (county)/state of convictions:

Are you listed on a sex offender registry? **Yes No**

Are you listed on the Department of Human Services' Child Abuse Registry? **Yes No**

Has any civil or criminal complaint or any other written complaint been made against you relating to sexual abuse, sexual harassment or physical abuse? **Yes No**

Please explain:

Have you ever terminated your employment or had your employment terminated for reasons relating to illegal activities or claims of sexual abuse or physical abuse? **Yes No**

Please explain:

**PLEASE NOTE:** Responding "yes" to any of the previous questions is not an automatic bar to employment. The date of the offense and the relationship between the offense and the position for which you are applying for will be considered.

Have you worked in the Optimist Baseball/Softball program previously? **Yes No** If yes, how long?

Do you plan to work another job while you are employed with us? **Yes No**

If you are a college student, do you plan to attend summer classes? **Yes No**

**EDUCATION:** Please list your educational background including dates and diplomas/degrees earned beginning with high school. Also list any advanced education or special training/licenses.

High School:
College:
Special Training/Licenses:

**WORK EXPERIENCE:** List your work/qualifying experiences for the previous 10 years starting with the most recent – place additional experiences on a separate sheet of paper. If you do not want your current employer contacted, please indicate.

<b>Employer:</b>	<input type="text"/>	Dates Employed:	<input type="text"/>
Address:	<input type="text"/>	City/State/Zip:	<input type="text"/>
Position:	<input type="text"/>	Supervisor's Name/Phone:	<input type="text"/>
Duties/Responsibilities/Skills:	<input type="text"/>		
Reason For Leaving:	<input type="text"/>		

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Address:	<input type="text"/>	City/State/Zip:	<input type="text"/>
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Address:	<input type="text"/>	City/State/Zip:	<input type="text"/>
Position:	<input type="text"/>	Supervisor's Name/Phone:	<input type="text"/>
Duties/Responsibilities/Skills:	<input type="text"/>		
Reason For Leaving:	<input type="text"/>		

## LIFEGUARDS

**Special Training:** Please check the certifications you possess and the expiration date for each.

	<u>Certified</u>	<u>Expiration Date</u>		<u>Certified</u>	<u>Expiration Date</u>
Basic Water Safety	<input type="checkbox"/>	<input type="text"/>	Certified Pool Operator	<input type="checkbox"/>	<input type="text"/>
Basic Lifeguarding	<input type="checkbox"/>	<input type="text"/>	First Aid	<input type="checkbox"/>	<input type="text"/>
Water Safety Instructor	<input type="checkbox"/>	<input type="text"/>	CPR	<input type="checkbox"/>	<input type="text"/>
Lifeguarding Instructor	<input type="checkbox"/>	<input type="text"/>			

## COACHING POSITIONS

### Related Sports Activities:

College:  Coach:  Dates:

Position(s):  Awards:

High School:  Coach:  Dates:

Position(s):  Awards:

### Coaching Experience:

School/Organization:  City/State:

Sport Coached:  Grade/Age of Team:

Coached How Long?

  

School/Organization:  City/State:

Sport Coached:  Grade/Age of Team:

Coached How Long?

**PROFESSIONAL REFERENCES:** List at least three related to employment.

**Reference's Name:**  Phone   
Work/Home:   
Address:  City/State/Zip:   
Relationship:

**Reference's Name:**  Phone   
Work/Home:   
Address:  City/State/Zip:   
Relationship:

**Reference's Name:**  Phone   
Work/Home:   
Address:  City/State/Zip:   
Relationship:

I hereby certify the above information, to the best of my knowledge, is true, accurate and complete. Any misrepresentation or willful omissions of fact shall be sufficient cause for disqualification of this application or termination of potential employment. I authorize verification of any of this information. I understand that prior to employment a criminal background check including the list of sex offenders and the child abuse registry may be done.

I authorize all current and former employers to release any information concerning my background.

I understand this application is not a contract of employment. I understand that according to Federal law all individuals who are hired must, as a condition of employment, produce certain documentation verifying their identity and their legal authorization to work in the United States.

Signature:  Date: