



CITY OF ELKHORN
PARKS and RECREATION DEPARTMENT
200 Devendorf Street
Elkhorn WI 53121
(262) 741-5114

Application for Seasonal Employment

Instructions

- 1. Application form must be submitted to be considered for employment
2. Answer all questions – complete application.
3. Date and sign the application on last page.
4. Attach resume and additional information as necessary.
5. Return to the above address.
6. Applications will be kept in an active file for twelve months.

Note: The City of Elkhorn provides an environment of equal employment opportunity (EEO) and does not discriminate on the basis of race, color, national origin, sex, sexual orientation, religion, age, disability or any other category protected by State or Federal law in all personnel actions. This includes recruitment, hiring, promotion, disciplinary action or other conditions of employment.

Position Desired: _____ Date: _____
Name: _____ College/temporary address _____
Permanent Address: _____
City, State, Zip: _____
Telephone: (Home) _____ (Work) _____ Ph _____ Date until _____
Social Security Number: _____
Any other licenses/certificates? (Lifeguard/CPR/CDL) _____
May we contact your present employer regarding your qualifications? _____
Have you worked for us before? _____ If yes, when? _____
What department? _____ List supervisor: _____
List any relatives working for us: _____
Email address: _____

EMPLOYMENT RECORD

List in order, present employer first. (Account for all periods between jobs. Include experiences in Armed Forces.)

From (mo-Yr) _____ To (Mo-Yr) _____ Job Title or Occupation: _____
Company name and address: _____
Supervisor's name & title: _____ Supervisor's phone #: _____
Description of your duties: _____

Highest salary earned \$ _____ per _____ Full time _____ Part time _____
Reason for leaving: _____

From (mo-Yr) _____ To (Mo-Yr) _____ Job Title or Occupation: _____
Company name and address: _____
Supervisor's name & title: _____ Supervisor's phone #: _____
Description of your duties: _____

Highest salary earned \$ _____ per _____ Full time _____ Part time _____
Reason for leaving: _____

From (mo-Yr) _____ To (Mo-Yr) _____ Job Title or Occupation: _____
Company name and address: _____
Supervisor's name & title: _____ Supervisor's phone #: _____
Description of your duties: _____

Highest salary earned \$ _____ per _____ Full time _____ Part time _____
Reason for leaving: _____

From (mo-Yr) _____ To (Mo-Yr) _____ Job Title or Occupation: _____
Company name and address: _____
Supervisor's name & title: _____ Supervisor's phone #: _____
Description of your duties: _____

Highest salary earned \$ _____ per _____ Full time _____ Part time _____
Reason for leaving: _____

From (mo-Yr) _____ To (Mo-Yr) _____ Job Title or Occupation: _____
Company name and address: _____
Supervisor's name & title: _____ Supervisor's phone #: _____
Description of your duties: _____

Highest salary earned \$ _____ per _____ Full time _____ Part time _____
Reason for leaving: _____

EDUCATION AND TRAINING

Did you graduate from high school? YES NO Dates attended: _____

If yes, name and location of high school: _____

If no, have you passes a high school equivalency or G.E.D. Test? YES NO

Date test was passes _____ State: _____

Training beyond high school (college or university, business college, military or other training you have received). **Indicate credits earned or completed.**

Name and Location	Full or Part Time	Dates Attended From To Mo/Yr Mo/Yr	Credits Earned	Major Fields of Study	Degree and Dates

REFERENCES

Examples include additional supervisors not listed previously or volunteer coordinators/lead workers knowledgeable of your work performance. Do not include individuals listed under employment record. Do not include personal friends or relatives.

Reference name and address: _____

Relationship to reference: _____

Reference's Telephone number: _____

Reference name and address: _____

Relationship to reference: _____

Reference's Telephone number: _____

Use this space for any additional information or comments regarding your qualifications for employment:

Do you currently possess a valid Driver's License? Lic. # _____ State: _____

CONVICTION RECORD

List any other names by which you have been known on official records. _____

Please list all convictions (including felonies, misdemeanors and ordinance violations). Exclude parking offenses and also exclude convictions prior to your 18th birthday. Conviction is not an automatic bar to employment. Each case is considered on its individual circumstances. I understand that a subsequent discovery by the City of false or incomplete information may be considered grounds for termination.

Date	Charge	Place	Court	Action Taken

Please Read Carefully

Applicant's Certification and Agreement

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application or given to the employer through the application process may be considered sufficient cause for dismissal. I am aware that a thorough investigation of my entire background is to be conducted. I hereby authorize and request release of any and all information concerning me (including a transcript of any academic record) to the City of Elkhorn or its agent upon presentation of this or copy hereof. I understand that the background check might be done either before or after an employment decision is reached and in fact could conceivably be done on multiple occasions during employment.

Some positions require a physical examination following an offer of employment. A record of the examination is placed in a separate, confidential medical file. I authorize any medical provider to supply this information to the City of Elkhorn.

In addition, I authorize all employers and other parties, whether named in my application or not, to provide information relative to my employment as requested by the City of Elkhorn.

I hereby release from liability and hold harmless the City of Elkhorn and all persons and corporations supplying this information to the City of Elkhorn and/or its agents. A photocopy of this authorization is effective as the original.

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

Print Name: _____
FIRST MIDDLE LAST

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with the City of Elkhorn will be based on your merit and no other consideration.

**ELKHORN PARKS, RECREATION & FORESTRY
DEPARTMENT SUPPLEMENTAL APPLICATION INFORMATION**

ALL PERTINENT AREAS ON THIS FORM MUST BE FILLED OUT TO BE CONSIDERED FOR EMPLOYMENT BY THE PARKS AND RECREATION DEPARTMENT. FAILURE TO DO SO WILL BE CAUSE FOR APPLICATION TO NOT BE CONSIDERED.

A. PARKS, RECREATION & FORESTRY JOB CATEGORY (ALL APPLICANTS)

Please list your preference for each position you are interested in by placing a 1, 2, & 3 on the blacks below. NOTE: Some positions have a minimum age requirement of 18. Some positions also require evening and weekends. Some of these positions may not be available at this time. Please refer to the employment flyers for more information.

SPRING/SUMMER

Parks

_____ Park Maintenance Worker

Pool

_____ Pool Manager
_____ Lifeguard
_____ Front Desk Worker
_____ Swim Instructor

Sports

_____ Adult Softball Umpire
_____ Youth Baseball/Softball Umpire
_____ Golf Instructor
_____ Cheerleading Instructor
_____ Youth Dance Instructor
_____ Soccer Instructor
_____ Baseball Instructor

Leisure

_____ Early Movements Instructor

FALL/WINTER

Sports

_____ Youth Flag Football Referee
_____ Adult Flag Football Referee

B. RECREATION SKILLS (ALL APPLICANTS)

In the following list of activities, ***check*** those activities in which you have taken part or had special training, ***double check*** those activities you have organized, directed and in which you are prepared to train or lead others.

SPORTS ACTIVITIES

_____ Baseball
_____ Softball
_____ Tennis
_____ Basketball
_____ Football
_____ Swimming
_____ Ice Skating
_____ Track
_____ Gymnastics
_____ Archery
_____ Golf
_____ Wrestling
_____ Yoga

SOCIAL ACTIVITIES

_____ Social Dancing
_____ Folk/Sq. Dancing
_____ Baton Twirling
_____ Tap Dancing
_____ Ballet
_____ Jazz

MISCELLANEOUS ACTIVITIES

_____ Active Games
_____ Singing
_____ Nature Lore
_____ Photography
_____ Outdoor Cooking
_____ Cheerleading
_____ Gardening
_____ Pom Pons
_____ First Aid
_____ Cooking
_____ Other _____

CRAFTS/HOBBIES

_____ Ceramics
_____ Leathercraft
_____ Macramé
_____ Painting
_____ Drawing
_____ Art
_____ Scrapbooking
_____ Weaving

C. BACKGROUND/EXPIERENCE RELATED TO POSITION APPLYING FOR

Please indicate below why you are applying for the position and what qualifications you have to offer the Parks and Recreation Department if you are selected.

D. LIFEGUARD/AQUATICS APPLICANTS ONLY

Indicate the following certification you have received, include the year in which you received this certification as well as the certifying organization (i.e. American Red Cross, YMCA, etc.).

First Aid Training
Year _____ Organization _____

Lifeguard Training Instructor
Year _____ Organization _____

CPR
Year _____ Organization _____

Water Safety Instructor
Year _____ Organization _____

Lifeguard Training
Year _____ Organization _____

Other _____
Year _____ Organization _____

Note: All lifeguard/aquatics applicants will be required to present a current certificate or card for each certification indicated above before being hired for employment

E. ADULT SOFTBALL, FLAG FOOTBALL OFFICIALS ONLY

How many years of officiating experience: Softball _____ Flag Football _____

How many years of playing experience: Softball _____ Flag Football _____

Do you belong to an official's association? Yes _____ No _____

Are you a registered WIAA official in the sport you are applying for? Yes _____ No _____

F. MINIMUM AGE (ALL APPLICANTS)

Do you meet the minimum age requirement of 15 by June 1 of this year? Yes _____ No _____

G. MINIMUM AGE (LIFEGUARD APPLICANTS)

Do you meet the minimum age requirement of 16 by June 1 of this year? Yes _____ No _____

H. AVAILABILITY FOR WORK (ALL APPLICANTS)

Number of hours per week you want to work: _____

Please indicate the hours of the day that you are able to work in the space below.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Note: Hours vary by position. For specific information refer to the Employment Opportunities flyer or contact the Parks and Recreation Department at 741-5114