

**LAKE PARSIPPANY PROPERTY OWNERS ASSOCIATION
P.O. BOX 62
LAKE PARSIPPANY, NJ 07054**

Application for Lifeguard Position

NAME _____

ADDRESS _____ TOWN _____

STATE _____ ZIP _____ PHONE _____

EMAIL _____

EMERGENCY/ PARENT CONTACT AND PHONE

NAME _____ RELATIONSHIP _____

PHONE NUMBER _____

CURRENT SCHOOL GRADE: HS _____ COLLEGE _____

EMPLOYMENT AVAILABILITY: DAYS _____ EVENINGS _____

SCHEDULE AVAILABILITY: FULL TIME _____ PART TIME _____

WILL THIS BE YOUR PRIMARY SUMMER JOB? ___ YES ___ NO _____

IF NO, PLEASE SPECIFY DAYS YOU ARE NOT AVAILABLE M T W TH F S SU

PREVIOUS WORK EXPERIENCE: Include All Jobs Over the Past Two Years, Starting with The Most Recent.

COMPANY NAME _____

ADDRESS _____

PHONE _____

POSITION _____

DATES EMPLOYED _____

PART TIME _____ FULL TIME _____

DUTIES/JOB DESCRIPTION _____

COMPANY NAME _____

ADDRESS _____

PHONE _____

POSITION _____

DATES EMPLOYED _____

PART TIME _____ FULL TIME _____

DUTIES/JOB DESCRIPTION _____

REQUIREMENTS

Attach one copy, front and back, of each current (unexpired) certificate to your application

CERTIFICATION	EXPIRATION DATE
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FIRST AID & SAFETY	_____
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CPR/AED	_____
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LIFEGUARDING	_____
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WATERFRONT LIFEGUARDING	_____
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OTHER	_____
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I understand that submission of this application to the LPPOA does not imply guaranteed employment and that any applicant accepted for employment will be duly notified by the LPPOA.

DATE

SIGNATURE