

SHILLINGTON RECREATION BOARD

Returning Employee

Date: _____

Name: _____

Address:

Phone Number: _____

Email: _____

Years and position worked for Borough: _____

Check position(s) for which you are applying:

<input type="checkbox"/> Pool Manager	<input type="checkbox"/> Asst. Pool Manager	<input type="checkbox"/> Desk Clerk
<input type="checkbox"/> Swim Coach	<input type="checkbox"/> Asst. Swim Coach	<input type="checkbox"/> Lifeguard
<input type="checkbox"/> Snack Bar Manager	<input type="checkbox"/> Snack Bar	<input type="checkbox"/> Diving Coach
<input type="checkbox"/> Playground Leader	<input type="checkbox"/> Tot Lot Leader	

Qualifications: (Attached a copy of your certificates)

<input type="checkbox"/> Certified Lifesaving	Expiration Date: _____
<input type="checkbox"/> CPR	Expiration Date: _____
<input type="checkbox"/> First Aid	Expiration Date: _____
<input type="checkbox"/> AED	Expiration Date: _____

Required Clearances: (Attached a copy of your certificates)

<input type="checkbox"/> Child Abuse History	Date obtain: _____
<input type="checkbox"/> Criminal History Check	Date obtain: _____
<input type="checkbox"/> FBI Fingerprinting	Date obtain: _____
<input type="checkbox"/> Working Papers	Date obtain: _____ (*Only applicable to employees under 18)

*NOTE: Employment cannot begin until the Borough has received all required clearances.

First date available to work: _____

List any dates you cannot work: _____

I certify that there are no misrepresentations omissions, or falsifications in the foregoing statements and answers, and the entries made by me above are true, complete and correct to the best of my knowledge and beliefs and are made in good faith.

Applicant's Signature

Please return to: Kyle.kuser@gmsd.org (put Employment application in subject line)

Applications Due March 1st, 2022