
Lifeguard

Qualifications:

1. Must be at least 14 years of age.
2. Hold Red Cross Lifeguard Training Certification or equivalent, CPR Certification, plus WSI desired.

3. Be available to work 5-6 days per week including Saturday and Sunday.

Responsible To:

1. Pool Manager
2. Assistant Pool Manager(s)
3. Borough Secretary

General Responsibilities:

Protect the safety and well being of each patron using the aquatic facilities. The lifeguard will work directly with participants providing courteous, friendly and professional assistance. Lifeguard responsibilities include the following: Maintains constant surveillance of patrons in the facility; acts immediately and appropriately to secure safety of patrons in the event of emergency. Provides emergency care and treatment as required until the arrival of emergency medical services. Presents professional appearance and attitude at all times, and maintains a high standard of customer service. Performs various maintenance duties as directed to maintain a clean and safe facility. Prepares and maintains appropriate activity reports. Performs miscellaneous job-related duties as assigned.

Scheduling: Managers will coordinate with their staff to create a schedule to staff all the budgeted operating hours and tasks required to run and maintain the pool and facility. The entire staff must initial the schedule and everyone must receive a copy. The schedule is a 2-week schedule to be completed and posted at least one week prior to the start date of the schedule. Lifeguards are expected to be scheduled 10-15 hours per week at the facility or what the schedule allows depending on the Lifeguard level. The entire staff must be willing to work holidays, weekends and nights.

Daily Tasks: Lifeguards are not above performing the tasks/cleaning themselves and should assume that they will be cleaning the bathrooms, deck furniture, pool tiles, emptying the trash, vacuuming the pool, etc.

Job Relationships: Reports to: 1) Pool Manager 2) Supervised by: Pool Assistant Manager(s) 3) In the absence of professional aquatic personnel, the lifeguard is under the supervision of the head lifeguard.

Meetings: Managers are required to hold periodic meetings with their staff to insure the harmony, competency, and safety of their staff. All employees will be paid for these meetings and to report on and receive feedback on the performance and customer satisfaction of the staff.

Uniforms: A lifeguard's appearance will be a credit to himself and representative of his/her organization. Lifeguards will be well groomed. Lifeguards will be required to be in proper uniform when on duty. Lifeguards must be able to be easily recognized as pool employees. Any shirt or jacket must be approved by the Pool Manager.

Lifeguard Shifts: All lifeguards are expected to follow the rotation schedule for the day unless directed by a supervisor to do otherwise.

Trainings: Lifeguards will have current certification in Lifeguarding, Standard First Aid, and CPR.

Lifeguard Alertness: Lifeguards will be expected to remain alert and watchful during their shift. Please refrain from lengthy conversations with pool patrons. Save this for break time.

Music: The lifeguards will not be permitted to have music at their stations. Music will be played in the office area at a normal tone. Lifeguards will not listen to music with inappropriate language anywhere on the premises.

Lifeguard Evaluations: Lifeguards will be evaluated on a regular basis by the pool manager using an Evaluation Form. Lifeguards can feel free to evaluate the pool managers on this basis also. A failing score will be received when not showing up for work when scheduled, blatantly not enforcing the rules, or not wearing the proper uniform. These are just a few of the actions that will receive a failing score. Others may be included.

Specific Responsibilities:

1. Insure the safety of patrons using the aquatic facilities.
2. Apply all rules and regulations consistently.
3. Coordinate emergency procedures or provide first aid in emergency situations.
4. Maintain positive relations and rapport with patrons.
5. Perform general maintenance/custodial functions as requested.
6. Attend regularly scheduled staff meetings and in service meetings and in service training.
7. Other duties as assigned.

KNOWLEDGE, SKILLS, AND ABILITIES REQUIRED:

- Ability to react calmly and effectively in emergency situations.
- Skill in the application of lifeguarding surveillance and rescue techniques.
- Ability to pass a pre-employment physical skills evaluation as stipulated by the department.
- Ability to prepare routine administrative paperwork.
- Knowledge of CPR and emergency medical procedures.
- Ability to follow routine verbal and written instructions.

Acceptance of Responsibilities: (Circle One)

I have read the job description above and can perform the job duties **without** any reasonable accommodation.

I have read the job description above and can perform the job duties **with** reasonable accommodation. **Please specify.**

Signature of Applicant / Employee: _____ Date: _____

Witness:

Supervisor's Signature: _____ Date: _____

Employment Application

Please fill out completely. Type in your information or handprint using a black or blue pen.

Personal Information

Name (Last, First, MI)

Street address

City, State, Zip

Home phone number

Work phone number

Cell phone number

E-mail address

Driver's license number/state/expiration (*if job involves any driving*)

Employment Desired

Position applied for

How did you hear about this position?

Date available for work

Desired hours (full time, part time, etc.)

Education

	Name and Address of School	Course of Study	Total Years of Study	Degree/ Diploma
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				

List any seminars, classes or other education not listed above which may help qualify you for this position (if you need additional space, please use page 10):

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Last Name, First Initial:

Today's Date:

Employment Application

Employment History

List below all present and past employers over the past ten years, starting with your **most recent** employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

1.	Employer (current <input type="checkbox"/> Yes <input type="checkbox"/> No)		Start Date	End Date	Essential job functions of final position
	Address				1.
	City, State, Zip		Starting Pay	Ending Pay	2.
	Phone number				3.
	Fax number	Supervisor(s)			4.
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving (or wanting to leave if currently employed)				
	What value did you add to this company or its customers?				

2.	Employer		Start Date	End Date	Essential job functions of final position
	Address				1.
	City, State, Zip		Starting Pay	Ending Pay	2.
	Phone number				3.
	Fax number	Supervisor(s)			4.
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				

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Employment Application

Employment History

3.	Employer	Start Date	End Date	Essential job functions of final position
	Address			1.
	City, State, Zip	Starting Pay	Ending Pay	2.
	Phone number			3.
	Fax number	Supervisor(s)		4.
	Job position(s)	E-mail address of supervisor		
	Reason(s) for leaving			
	What value did you add to this company or its customers?			
			
			
4.	Employer	Start Date	End Date	Essential job functions of final position
	Address			1.
	City, State, Zip	Starting Pay	Ending Pay	2.
	Phone number			3.
	Fax number	Supervisor(s)		4.
	Job position(s)	E-mail address of supervisor		
	Reason(s) for leaving			
	What value did you add to this company or its customers?			
			
			

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Employment Application

Employment History

5.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Pay	Ending Pay	2.
	Phone number				3.
	Fax number	Supervisor		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
				
				
6.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Pay	Ending Pay	2.
	Phone number				3.
	Fax number	Supervisor		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
				
				

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Employment Application

Additional Information

List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status.

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List any languages other than English that you can speak, read or write that could be of benefit to the position applied for:

	Fluent	Good	Fair
Speak			
Read			
Write			

Identify formal job training that relates to this position:

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Identify what skills or certifications you possess related to this position:

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If hired, what value would you bring to our company?

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Describe what you believe are the most unique features of your work history:

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Employment Application

Additional Information

Have you ever been employed with this company before? Yes No
If Yes, when?

Do you have any friends or relatives employed by this company? Yes No
If Yes, please provide their names and relationship to you:

Are you currently employed? Yes No
May we contact your employer? Yes No
Are you currently on "lay off" status and subject to recall? Yes No

If you are under 18 years of age, can you provide proof of your eligibility to work? Yes No

If hired, can you provide proof of U.S. citizenship or proof of your legal right to work in the U.S.? Yes No

Do you or will you in the future require sponsorship for employment visa status (e.g. H-1B visa status)? Yes No

Are you able to perform all of the essential functions of the job for which you are applying with or without reasonable accommodation? Yes No

If driving is a requirement of the position applied for, have you in the last 7 years been convicted of Driving Under the Influence "(DUI)" Yes No N/A

If hired, do you have a reliable means of transportation to and from work? Yes No

If hired, would you be able to travel or work overtime or weekends as needed? Yes No

INSTRUCTIONS FOR ANSWERING APPLICATION QUESTION ABOUT BEING CONVICTED OF A CRIME OR OTHER STATE-SPECIFIC REQUIREMENTS

Please respond to the following questions in the most complete and accurate manner possible. Do not identify convictions for convictions for which the criminal record has been expunged or sealed by the court or, misdemeanor convictions for which any probation has been completed and the case dismissed by the court. Furthermore, please note that no applicant will be denied employment solely on the grounds that they have been charged, committed, or convicted of (or pleaded guilty or no contest in) a criminal offense, or solely on an affirmative answer. The nature, date, surrounding circumstances and relevance of the offense to the position(s) applied for will be considered. A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question. If you are applying for a position with our company in the following states, please read the instructions which follow below before responding.

Have you ever, under your name or another name, been convicted off (or pleaded no contest to) a felony or misdemeanor? Yes No

Have you ever, under your name or another name, been convicted of a crime, which resulted in your being in prison and/or jail and released from prison and/or jail or paroled? Yes No

If yes to either question above, please fully explain when, where and of what you were convicted and the result of the case(s). _____

Are you currently under arrest, or released on bond on your own recognizance, pending trial for a criminal offense? Yes No

If yes, state the nature of the crime charged, and when and where the trial is pending. _____

Employment Application

REFERENCES:

List below three persons not related to you who have knowledge of your work performance within the last 5 years

Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted
 		
Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted
 		
Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted

Additional Space

Additional space provided to expand on any points or questions asked previously in this application

PLEASE USE ADDITIONAL PAPER IF NECESSARY

Employment Application

Please read each statement closely and initial each acknowledging your understanding

Equal Employment Opportunity Statement

_____ This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

Discrimination and Sexual Harassment Policy Statement

_____ This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

Disclosure to Applicants Concerning Drug/Alcohol Testing

_____ If you are offered a position with the Company, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

Medical History Questionnaire

_____ I herewith affirm that the employer has an offer of employment to me, conditioned on the satisfactory completion of this questionnaire, and, if necessary, at the sole discretion of the employer, a medical examination.

The purpose of this inquiry is to determine whether I currently have the physical or mental qualifications necessary to perform the job that has been offered; whether and what accommodations may be necessary; and whether I can perform the job without posing a direct threat to the health or safety of myself or others; and for the purposes and reasons as stated in the attached questionnaire.

This information will be kept confidential in a separate medical file, apart from my personnel file. I herewith affirm that the questions found in the attached medical questionnaire have not be asked of me by anyone with the employer until after I have signed a separate document and have been offered a job.

Name: _____

Signature: _____

Witness: _____ Witness: _____

Complete and Accurate Information

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

At-Will Employment

_____ I understand and agree that if I am employed, my employment will be "at-will", which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superceded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company's president.

Testing Authorization

_____ If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment.

Investigation Authorization

_____ I authorize investigation into all statements and references contained in this application. Said investigation may include interviews with past employers, workers and friends. Said investigation may include credit, driving, criminal background, references and other background checks. As a condition of applying for this job, I authorize reasonable post-hire investigations into my credit, driving and criminal background.

Company Obligation

_____ I understand and agree that the Company's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the Company is under no obligation to hire me as the result of accepting this completed application.

MY ANSWERS HAVE BEEN TRUE AND ACCURATE PURSUANT TO THE PENALTY OF PERJURY UNDER THE LAWS OF THIS STATE. I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.

Signature

Date

