

# Hurricane City Pool 2025 Season

Turn applications in at the Hurricane Community Center - 63 S 100 W, Hurricane, UT

Monday through Thursday 9:30a to 8:00p

Friday 9:00a to 12:00p

We will be accepting Lifeguard, Swim Aide, Pool Front Desk applications starting February 14th.

### Applications DUE by 12:00pm on Friday Mar 7th, 2024

- ONLY fully completed applications will be considered.
- Choose references that are not related to you. We will call.
- You MUST attach a copy of all certificates you list in your application.
- Please fill out the questionnaire COMPLETELY including the time off request area.
- Upon turning in an application you will be assigned an interview time. Come prepared for a professional interview.
- All lifeguard positions will also require a water interview.

**Questions? Contact** 

Michael Carter, Pool Manager

mcarter@hurricane.utah.gov

## City of Hurricane Human Resource Department 147 N 870 W Hurricane, Utah 84737 (435) 635-2811

# **EMPLOYMENT APPLICATION**

Title of position(s) applied for:  Type of employment desired: Full Time		nek Tampararu	Voluntoor
ate available for employment:	Lowest sala	ry acceptable:	Per month
APPLICANT INFORMATION			
Name:			
Address:			
Street	City	State	Zip Code
Telephone number:			
Home	Cell	V	Vork
Email address:			
Do you have relatives working for the City of Hu	ırricane?NoYes	, please List:	
Have you ever been employed by the City of Hu	rricane? No Yes,	Year & Dept:	
Are you retired from an employer covered by Ut etc) and currently receiving a pension check? (Methere may be restrictions on your employment in	farking "Yes" will not ex	xclude you from con	isideration, but
If the position for which you are applying is hazar heavy equipment or hazardous materials, are you			
Have you ever been convicted of a felony? details, and penalties for each occurrence, includi be judged in relation to time, seriousness, circum necessarily bar you from employment.	ng dates of any probation	periods. Note: Each	conviction will
VETERAN'S PREFERENCE Are you a veteran? No Yes	Do you claim Disabled V	eteran Preference? _	NoYes
If you are claiming veteran or disabled veteran status, pleat percent of disability you have been assigned with each app		D-214 and a copy of you	ar letter stating the
Applicants will be required to unde		dition of employme	ent

The City provides reasonable accommodations to the known disabilities of applicants in compliance with the Americans with Disabilities Act.

Read this application carefully. Type or print clearly in ink. You must sign and date this application and include all information requested. If more space is needed, attach an addendum using the same application format. Resumes may be submitted as an attachment but will not be accepted in lieu of the City Application. Applications which include wording such as "see resume" will be rejected. Copies of college transcripts or other official documents are required when claiming college credit and must accompany your application. False statements, evidence of fraud or deceit in connection with this application will disqualify you from the selection process, and if discovered after employment will be grounds for disciplinary action, up to and including termination. This application and all attached documents are official records of the City of Hurricane and will not be returned.

Certificates: List job related p	rofessional or trade lice	ense, certificates, instructor	certifications, or registrations:		
Туре	Stat		Number		
Languages: List languages you sp	eak, read, and write oth	ner than English:			
Do you have a valid Drivers Licer Do you have a valid C.D.L.?	No No	cs State & Number:	oor:		
Typing Speed: Net w	ords per minute:	Shorthand Speed:	Words per minute:		
Have you certified your type and/	or shorthand speed with	h job service within the las	t 12 months: No Yes		
EDUCATION AND TRAI	NING				
Have you graduated from High So	chool or Received a Hi	gh School Equivalency Dip	oloma (GED)? No Yes		
Circle the highest grade complete	d: 1 2 3 4 5 6 7 8	9 10 11 12			
College, Business, Trade School	Credits Completed Semester Hours / Quarter Hours	Major	Degree, Certificate, or Years Attended		
conege, Duamess, Truce Sensor	Semester from S. Quarter from S	1/14/01	Degree, Cortmette, d. Tetas Intellact		
NOTE: WHEN CLAIMING CO	OLLEGE CREDIT, P	LEASE ATTACH TRAN	SCRIPTS		
EXPERIENCE BEGINNING WITH THE PR including military service, if appresume may be attached, but to (Note: If adding additional sheets)	pplicable. If you wish his section must be o	to elaborate on your experience on your experience of the completed.	erience, a supplemental sheet or		
Employer:		From:	ear Month/Year		
- 1		Month/Ye	ear Month/Year		
Complete Address:					
			Full-time Part-time		
Phone Number: ( )		Vol	unteer Apprenticeship		
Job Title:		Hours per	Hours per week:		
Supervisors Name:					
Duties:					

Reason for Leaving: \_\_

Employer:		From: Month/Year	To:
Complete Address:_			Monul 1 car
			Full-time Part-time
Phone Number: (	)	Voluntee	r Apprenticeship
Job Title:		Hours per week	:
Supervisors Name:_		Last Monthly Sa	alary:
Duties:			
Reason for Leaving:	_		_
Employer:		From:Month/Year	To:
Complete Address:			Month/Year
complete 7 tudiess.			Full-time Part-time
Phone Number: (	)	Voluntee	r Apprenticeship
			:
			ılary:
REFERENCES List three non-relat you are applying. Full Name	Present Business or Home Address	knowledge of your qualification  Business or Occupation	ns for the position for which Telephone Number
			( )
			( )
			( )
			( )
CERTIFICATION	OF APPLICANT		
	paragraphs carefully before signing.		
written or verbal form whi	vious employer and references to give and rel ch relates to my ability to perform the duties of information in considering and reviewing m	of the position for which I am applying. I re	
	ane City to determine my competence for cerninal and other job related information about		ents or in departments where funds a
I understand that this empl the contrary are hereby ex	oyment application and any other City docum pressly disavowed.	nents are not contracts of employment and	that any oral or written statements
I certify that all statements disqualification or dismiss	made in this application are true and complet al.	e, and understand that any misrepresentat	ion of material fact may subject me
Signature:		Date:	

#### **PRIVACY ACT NOTICE**

#### Purpose and Uses

Information provided on this form will be furnished to individuals in order to obtain information regarding your activities in connection with an investigation to determine (1) fitness for employment (2) clearance to perform contractual service for the City Government (3) security clearance or access. The information obtained may be furnished to third parties as necessary for the fulfillment of official responsibilities.

#### Effects of Nondisclosures

Furnishing the requested information is voluntary, but failure to provide all or part of the information may result in a lack of further consideration for employment, clearance or access or in the termination of your employment.

# 2025 Questionnaire

Name:
Contact Information: Please include the following contact information. List an email address that you
use regularly (preferably not a school email). We will contact you with response letters via email.
Phone number:
Email address:
List all certifications you presently have: (a copy of the front and back of all certifications must be attached) (if you are enrolled in a class that ends after the application deadline please specify which class you are taking, where it is being held, and the ending date. If you are offered a position before you have completed a certification required for that position, the position will be contingent on successful completion.)
Title of Certification / Expiration Date:
Uniform info:
<ul> <li>if you are applying for front desk, you only need to fill out your t-shirt size.</li> <li>if you are applying for swim aide position, you need to fill out the entire section.</li> <li>if you are applying for a lifeguard position, you need to fill out the entire section.</li> <li>if you fill out the sweatshirt information, you will be expected to pay for the sweatshirt ordered.</li> </ul>
Swimsuit size (Women's 24 to 40 : Men's S to XL)  Performance T-shirt size (Youth XL or Adult Small - XXL)
Tell us the number one reason you want to work at the pool?

# 2025 Availability

Name	2:
	e highlight or mark the shifts you can work. Please email Mike if you have any questions. e specify if there is any specific days you can't work in the space provided for each time.
	<b>SPRING needs:</b> SPRING SEASON—Apr 7 <sup>th</sup> to May 24 <sup>th</sup>
Swim :	Lessons—teachers, lifeguards, swim aides (I need a full session commitment—three weeks)
	Night Session A – Apr $8^{th}$ to Apr $24^{th}$ - Tues, Wed, Thurs – $6:00p-7:00p$ Night Session B –April $29^{th}$ to May $15^{th}$ -Tues, Wed, Thurs – $6:00p-7:00p$
<u>Open</u>	Swim – lifeguards, front desk, snack shack
0 0	Fri - 4:00p - 7:00p
0	ight programming – lifeguards  Tues – 8:30a to 10:30a (Water Aerobics/Lap Swim)
0	Wed – 8:30a to 10:30a (Water Aerobics/Lap Swim) Thurs – 10:45a to 1:15p (SPED Swim) Water Aerobics—Apr 8th to May 23rd

 $\begin{tabular}{ll} SUMMER needs: \\ \hline \end{tabular} We are open Mon through Sat 6:00a to 9:00p-I need applicants that are \\ \hline \end{tabular}$ interested in making employment a priority for our Summer season.

Time off requests: If you know your dates now please list them. Summer time off requests will be due by May 1st. Requests submitted after that date will not be guaranteed. Please list any known time off requests that you know you will have prior to the season starting. Each week you will have

Sunday and one additional day off. As the season is underway you may submit a request specifying
single day off requests. If you don't ask for the day off we are expecting you can work those days.
Thank you for your commitment in seeking full time employment.
Specify days here:
1
2
3.
FALL needs: FALL SEASON—Aug 12 <sup>th</sup> to Sept 27 <sup>th</sup>
$\underline{\textbf{Swim Lessonsteachers, lifeguards, swim aides (I need a full session commitmentthree weeks)}}$
N' 1. C ' E A 15th A 20th E W 1 E C 00 7 00
O Night Session F – Aug 15 <sup>th</sup> to Aug 28 <sup>th</sup> - Tues, Wed, Thur – 6:00p – 7:00p
○ Night Session G – Sept 2 <sup>nd</sup> to Sept 18 <sup>th</sup> - Tues, Wed, Thur – 6:00p – 7:00p
Open Swim – lifeguards, front desk, snack shack
o Fri - 4:00p – 7:00p
o Sat - 12:00p – 7:00p
Possible Rentals
o Fri - 7:00p – 9:00p (16yo or older ONLY!)
o Sat - 10:00a – 12:00p
Sat - 7:00p - 9:00p
Open Swim—FALL: Aug 8 <sup>th</sup> to Sept 25 <sup>th</sup>
Morning programming – lifeguards
○ Mon – 8:30a to 10:30a (Water Aerobics)
○ Wed – 8:30a to 10:30a (Water Aerobics)
o Wed – 10:45a to 1:15p (SPED Swim)
o Fri – 8:30a to 12:30p (Water Aerobics/SPED)
Water Aerobics—Aug 12 <sup>th</sup> to Sept 25 <sup>th</sup>

#### Winter Season, High School Swim Team – lifeguards

○ Mon – Fri 3:30p to 5:30p Swim Team - Sept15<sup>th</sup> to Feb 15<sup>th</sup>