

CENTRAL PARK POOL

EMPLOYMENT APPLICATION

Name & address: _____

Phone: _____ Age: _____ Date of Birth: _____

Position Applying For: Guard _____ Concession _____

Would you be willing to do both? Yes _____ No _____

Do you have current lifeguard certification? Yes _____ No _____

Date of certification: _____

Date of expiration: _____

Did you work for the City of Hillsboro last year? Yes _____ No _____

Would you be available to work any time? Yes _____ No _____

If no, please explain limitations: _____

Other work experience: _____

Signature: _____ Date: _____

Please return to City Hall. If mailing, send to Hillsboro City Hall, P.O. Box 556, Hillsboro, IL 62049