

VILLAGE OF LINCOLNSHIRE

Application for Employment

(Please Print Clearly)

PERSONAL

Date _____

Name _____
Last First Middle

Email _____ Cell Phone No. _____

Present Address _____ Telephone No. _____
Street

City State Zip
 Are you legally eligible for employment in the U.S.A.? Yes _____ No _____ (if yes, verification will be required)

Are you of the legal age to work? _____ Position(s) applied for _____

Were you previously employed by us? _____ If yes, when? _____

If your application is considered favorably, on what date will you be available for work? _____

Are there any other experiences, skills, or qualifications which will be of special benefit in the job for which you are applying? (Applicant should not list any information that Federal and/or State law precludes obtaining in the pre-employment stage)

How did you learn about this job opening? _____

RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Last Yr. Completed				Did You Graduate?	Degree
			5	6	7	8		
Elementary	_____	_____	5	6	7	8	Yes	
	_____						No	

High	_____	_____	1	2	3	4	Yes	
	_____						No	

College	_____	_____	1	2	3	4	Yes	
	_____						No	

Other (Specify)	_____	_____	1	2	3	4	Yes	
	_____						No	

List below present and past employment, beginning with your most recent

1. Name and Address of Company and Type of Business	From	To	Salary Start	Salary End	Reason for Leaving?
			\$	\$	
	Job Title & Duties:				
Telephone:					
Name of Supervisor:					

2. Name and Address of Company and Type of Business	From	To	Salary Start	Salary End	Reason for Leaving?
			\$	\$	
	Job Title & Duties:				
Telephone:					
Name of Supervisor:					

3. Name and Address of Company and Type of Business	From	To	Salary Start	Salary End	Reason for Leaving?
			\$	\$	
	Job Title & Duties:				
Telephone:					
Name of Supervisor:					

4. Name and Address of Company and Type of Business	From	To	Salary Start	Salary End	Reason for Leaving?
			\$	\$	
	Job Title & Duties:				
Telephone:					
Name of Supervisor:					

I hereby give permission to contact the employers listed above concerning my prior work experience. If there is a particular employer you do not wish us to contact, please indicate which one(s).

Signed _____

PERSONAL REFERENCES (not former employers or relatives)

Name and Occupation	Address	Telephone Number

Have you been convicted of a crime, excluding misdemeanors and summary offenses, in the past ten years which has not been annulled or expunged or sealed by a court? Please describe _____

You have been given a written job description listing essential job functions of the position(s) for which you have applied. Please review the job description(s) and answer the following questions. Are you able to perform each of the essential job functions with or without accommodation listed for each position for which you have applied?

If no, list the function(s) you are unable to perform.

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer.

Signature of Applicant _____

VILLAGE OF LINCOLNSHIRE
Job Description

TITLE: Life Guard

DEPARTMENT: Public Works

DATE: April, 2011

GENERAL DESCRIPTION

Performs general beach supervision, including aiding distressed swimmers when necessary, and general cleaning of the beach and Spring Lake Park Pavilion.

SUPERVISION RECEIVED

Works under the direct supervision of the Lifeguard Supervisor.

SUPERVISION EXERCISED

None.

ESSENTIAL DUTIES

Watches all swimmers in the lake and aids any swimmer in need of assistance, while following accepted lifesaving practices.

Maintains order among beach users, tests any swimmers with questionable swimming skills.

Sets out all life saving equipment in morning, and locks equipment up at closing.

Collects daily use fees, checks beach tags, enforces beach rules and keeps a daily log of all cash transactions.

Cleans and rakes beach and cleans the Spring Lake Park Pavilion interior and grounds in the morning and as necessary.

Maintains personal time records.

Performs others duties as required or assigned.

CONTACT OUTSIDE OF DEPARTMENT

Lifeguard Job Description

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General public.

TOOLS AND EQUIPMENT USED

First aid kit, back board, fisherman's crook, life preserver, bull horn, whistle, rake, broom.

PHYSICAL DEMANDS

Lifting, pushing, pulling or carrying of objects up to 100 lbs. occasionally, under 20 lbs. frequently; some walking and standing; occasional bending, twisting, kneeling, squatting, crawling, reaching, climbing, and grasping.

WORKING CONDITIONS

Outside continually in temperatures of up to 110 degrees. Must be able to work with chlorine.

MINIMUM EDUCATION, SKILL AND EXPERIENCE REQUIRED

Education

Requires current certification, American Red Cross Lifeguarding, R.94; Current certification, American Red Cross CPR for the professional rescuer.

Skills/Experience

Requires good public relations skills and ability to maintain records.

Must have ability to read and write reports, in English; must have hearing ability sufficient to understand radio transmissions and converse with others, both in person and over the telephone; must have speaking ability sufficient to communicate effectively with other individuals in person, over the telephone or over a radio.

New: Revised January 2010. Revised: April 2011
JMH



To: Village of Lincolnshire

I am aware that consumer and motor vehicle reports may be obtained as part of the Village of Lincolnshire's evaluation of my job application and/or employment. The reports may be procured by the Village of Lincolnshire from state motor vehicle departments, my driving record, and any assessments of my insurability for the insurance program, or other consumer reports.

By signing this letter, I hereby provide my authorization for the Village of Lincolnshire or their insurance company representative(s) to procure such information and reports, as well as additional reports about me from time-to-time as deemed appropriate, to evaluate my insurability or for other permissible purposes.

Sincerely,

Signature Applicant/Employee

Name as it appears on Driver's License

Driver's License Number/State of Issuance

CONSENT

I hereby agree to submit to a Hair or Urine Drug Screen at the expense of the Village of Lincolnshire. I understand that my submission to the examination in no way obligates the Village of Lincolnshire to offer me employment. I further understand that the results of the examination are confidential. I authorize the persons performing the Hair or Urine Drug Screen to release to, and to consult fully with, Village personnel in regard to this test. A copy of this CONSENT may be submitted to, and relied upon by the persons selected by the Village to perform the above service.

Applicant's Signature_____

Date_____

Witness' Signature_____

IF APPLICANT IS A MINOR, PARENT SIGNATURE IS REQUIRED BELOW

_____ **DATE**_____