

# Tama-Toledo Aquatic Center

– Application for Employment –  
*Please print clearly and use blue or black ink.*

## Your Contact Information

Your Name (First, Middle, Last): \_\_\_\_\_

Your Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Your T-Shirt Size: \_\_\_\_\_

Your Email Address: \_\_\_\_\_ Your Cell Phone Number: \_\_\_\_\_

Your Social Security Number: \_\_\_\_\_ Your Birthdate: \_\_\_\_\_ Your Age: \_\_\_\_\_

## Parent Contact Information (if applicant is under 18 years of age)

Parent Name (First, Last): \_\_\_\_\_ Parent Phone Number: \_\_\_\_\_

Parent Name (First, Last): \_\_\_\_\_ Parent Phone Number: \_\_\_\_\_

## Employment Details

Position applied for (Manager, Lifeguard, Concessions): \_\_\_\_\_

Were you previously employed here? Yes No Dates: \_\_\_\_\_ Are you a military veteran? Yes No

Your cell phone will be used for contacting you for most routine communications. If you have another preference, please indicate here: \_\_\_\_\_

## Most Recent Employment History

Previous Employer Name: \_\_\_\_\_ Previous Employer Phone: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Job Duties: \_\_\_\_\_ May we contact your past/present employer? Yes No

## References (Please use previous employer or teacher, not family)

Name of Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

*I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is cause for dismissal.*

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return Application to: City of Tama – Clerk's Office – 305 Siegel Street, Tama, IA 52339