

## RECREATION APPLICATION FOR EMPLOYMENT

NOTE: Recreation Employees are not part of the Town of Lakeshore's student lottery positions.

| Applicant Information   |                      |             |            |              |  |  |  |  |  |
|---|----------------------|-------------|------------|--------------|--|--|--|--|--|
| Last Name:  |                      | First Name: |            |              |  |  |  |  |  |
| Address:  |                      | City:       |            | Postal Code: |  |  |  |  |  |
| Phone number (Home):  | Phone number (Cell): |             |            |              |  |  |  |  |  |
| Email:  |                      |             |            |              |  |  |  |  |  |
| Position  |                      |             |            |              |  |  |  |  |  |
| Position applying for:  |                      |             |            |              |  |  |  |  |  |
| Available Start date:   |                      |             |            |              |  |  |  |  |  |
| Will you be 16 on the date you are available to start: Yes No |                      |             |            |              |  |  |  |  |  |
| Availability  |                      |             |            |              |  |  |  |  |  |
| Monday:   | <b>Tuesday:</b>      |             | Wednesday: |              |  |  |  |  |  |
| Thursday:   | Friday:              | Saturday    |            | y:           |  |  |  |  |  |
| Sunday:   |                      |             |            |              |  |  |  |  |  |
| Special Requests:   |                      |             |            |              |  |  |  |  |  |
|   |                      |             |            |              |  |  |  |  |  |
|   |                      |             |            |              |  |  |  |  |  |
|   |                      |             |            |              |  |  |  |  |  |
|   |                      |             |            |              |  |  |  |  |  |
|   |                      |             |            |              |  |  |  |  |  |
| Resume attached: Yes  | □ No                 |             |            |              |  |  |  |  |  |
| Education   |                      |             |            |              |  |  |  |  |  |
| Institution   | Year Completed       |             | Progran    | 1            |  |  |  |  |  |
|   |                      |             |            |              |  |  |  |  |  |
|   |                      |             |            |              |  |  |  |  |  |

| Describe in detail work and   | volunte   | er experiences. Inclu         | le all em                       | ployers, and dur   | ation  | of each experience.                 |
|---|-----------|-------------------------------|---------------------------------|--------------------|--------|-------------------------------------|
| Recreation Work Experie   | ence:     |                               |                                 |                    |        |                                     |
| Company / Organization  |           | Duration                      |                                 | Reason for leaving |        | ıties                               |
|   |           |                               |                                 |                    |        |                                     |
|   |           |                               |                                 |                    |        |                                     |
| Volunteer   |           |                               |                                 |                    |        |                                     |
|   |           |                               |                                 | T =                | T _    |                                     |
| Company / Organization  |           | Duration                      |                                 | Reason for leaving | Duties |                                     |
|   |           |                               |                                 |                    |        |                                     |
|   |           |                               |                                 |                    |        |                                     |
|   |           |                               |                                 |                    |        |                                     |
| <b>Qualifications: Please list</b>  | your cu   | irrent qualifications         |                                 |                    |        |                                     |
|   |           | ed / Recertified<br>onth/day) |                                 |                    |        | Earned / Recertified (yr/month/day) |
| NLS   |           |                               | Canfit PRO                      |                    |        |                                     |
| LSS Instructors   |           |                               | Five (Principles hy child dev.) | of                 |        |                                     |
| CPR (Level C)   |           |                               | Water                           | •                  |        |                                     |
| Defib   |           |                               | Senior Fitness<br>Certification |                    |        |                                     |
| Other qualifications:   |           |                               |                                 |                    |        |                                     |
|   |           |                               |                                 |                    |        |                                     |
|   |           |                               |                                 |                    |        |                                     |
|   |           |                               |                                 |                    |        |                                     |
| I certify that information con<br>be grounds for not hiring me<br>authorize the verification of a | or for in | nmediate termination          | of empl                         | -                  |        | _                                   |
| Signature   |           | Date                          |                                 |                    |        |                                     |

While we appreciate all applications, we acknowledge only those applicants invited for an interview. Personal information is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and will only be used for the purpose of determining eligibility for this competition. The Town of Lakeshore is an equal opportunity employer. Accommodations under the requirements of the Accessibility for Ontarians with Disabilities Act (AODA) must be made known in advance and will be provided upon request.

