Lake Hills Association LIFEGUARD APPLICATION

Water Safety Director: Ryan Morgan Email: lakehillswsd@gmail.com Phone: 203-952-7531

**PERSONAL INFORMATION**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CELL PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is this your first year guarding at Lake Hills? \_\_\_ Yes \_\_\_\_ No. If no how, many years have you previously guarded for us\_\_\_.

What was your previous assignment: \_\_\_PT \_\_\_\_ FT \_\_\_ Swim Lessons

**CERTIFICATIONS DATES:**

|  |  |  |
| --- | --- | --- |
| **Waterfront Guarding** | **CPR** | **First AID** |
|  |  |  |

**YOU MUST HOLD CURRECT CERTIFICATIONS In Waterfront Guarding, CPR, and First AID**

**PREVIOUS WORK HISTORY**

|  |  |  |  |
| --- | --- | --- | --- |
| **Location** | **Date** | **Supervisor**  | **Phone** |
|  |  |  |  |
|  |  |  |  |

What days of the week do you prefer? \_\_\_\_Su\_\_\_\_\_M\_\_\_\_T\_\_\_W\_\_\_\_Th\_\_\_\_F\_\_\_S

What are your preferred hours?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What days are you unavailable? \_\_\_\_Su\_\_\_\_\_M\_\_\_\_T\_\_\_W\_\_\_\_Th\_\_\_\_F\_\_\_S

 What dates are you unavailable to work for the summer? ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have WSI certification? \_\_\_\_\_Yes \_\_\_\_ N0

 If yes, do you want to teach lessons? \_\_\_\_ Yes \_\_\_\_ No. If you, do you prefer: \_\_\_M-F\_\_\_Sat only

Are you interest in coaching the Swim Team? \_\_\_\_ Yes \_\_\_\_NO

*This will require four additional hours of practice per week as well as a minimum of 4 swim meets for the summer.*

Lake Hills Association LIFEGUARD APPLICATION

Please answer the following questions with honesty

1. I want to lifeguard at Lake Hills because……..
2. I handle pressure as evidence by………
3. I have self-confidence as evidence by……
4. I consider myself to have the following redeeming qualities…….
5. Any suggestions for the upcoming season……

MANDATORY LIFEGAURD SWIMS DURING THE SEASON AS DEEMED BY THE WATER SAFTEY COORDINATOR

 Equipment Information

Bathing suit:\_\_\_\_\_\_\_\_ Whistle: \_\_\_\_\_\_\_\_\_

 Please email / mail this completed application, no later than May 1st, 2023, to the Water Safety Director. In addition please send a copy of your lifeguard certification.

Ryan Morgan

362 Tahmore Drive

203-952-7531

lakehillswsd@gmail.com

All certifications which need renewal are the responsibility of the lifeguard.