



2023 VOLGA LIFEGUARD APPLICATION

APPLICATION FOR EMPLOYMENT WITH THE CITY OF VOLGA

PO Box 217
Volga, SD 57071
lindsey@volgacity.com
605-627-9113

First Name: _____ Last Name: _____

Present Street Address: _____ City: _____

State: _____ Zip Code: _____ Email Address: _____

Cell Number: _____ Phone Number (home or other): _____

Are you at least 18 years of age or older: (YES/NO)

Do you have a Valid Drivers License? (YES/NO)

EDUCATION AND TRAINING

Highest Level of Education Completed or Current Standing of Education: _____

Name and Location of Current or Most Recent School: _____

Name and Location of High School: _____

List Any Skills, Licenses, Trainings, or Certifications Pertinent to this Job:

Have You Completed: Lifeguard Training? _____ WSI Training? _____

WORK HISTORY

Name of Employer _____ Address _____

Duties: _____

Position Held: _____ Employment Period: _____

Immediate Supervisor: _____ Title: _____

Name of Employer _____ Address _____

Duties: _____

Position Held: _____ Employment Period: _____

Immediate Supervisor: _____ Title: _____

Name of Employer _____ Address _____

Duties: _____

Position Held: _____ Employment Period: _____

Immediate Supervisor: _____ Title: _____

AVAILABILITY

When could you start in this position this year? _____

What approximate date would you be able to work until? _____

What would be your availability (ex. 40 hours/week)? _____

List any vacations or extended times (3+ days) where you would be unavailable this summer:

List Names and Numbers of Three Work or Professional References:

I hereby certify that the information given by me is true and complete to the best of my knowledge and belief.

Applicant Signature: _____

Parent or Guardian Signature (if applicant is under 18 years of age): _____
