



PLEASE PRINT

Codiac Vikings Aquatic Club

SUN SPLASH PROGRAM

2014 SUMMER EMPLOYMENT APPLICATION FORM

PERSONAL INFORMATION

SECTION 1

Last Name _____ First Name _____ Middle Initial _____

Address _____

City/Town _____ Postal Code _____

Telephone(home) _____ (cell) _____ E-mail _____

POSITIONS APPLIED FOR AND PREFERRED LOCATION (IF APPLICABLE)

SECTION 2

	Position	Location
1.	_____	_____
2.	_____	_____
3.	_____	_____

Which days are you available to work:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

How many hours per week were you looking for: _____

AQUATICS INFORMATION (ALL OTHER APPLICANTS SKIP TO SECTION 4)

SECTION 3

Check all the awards that you have.

	Issue date	Exp. Date
<input type="checkbox"/> Canadian Red Cross Assistant Water Safety Instructor and/or Water Safety Instructor Award	_____	_____
<input type="checkbox"/> Lifesaving Society (LSS), Bronze Cross or Canadian Red Cross Assistant Lifeguard Award	_____	_____
<input type="checkbox"/> LLS National Lifeguard or Canadian Red Cross Lifeguard Award <input type="checkbox"/> Pool <input type="checkbox"/> Waterfront	_____	_____
<input type="checkbox"/> WSI Water Safety Instructor	_____	_____

Indicate any experience you have working/volunteering in an aquatics environment.

CERTIFICATIONS AND PREVIOUS EMPLOYMENT

SECTION 4

1. Have you ever been employed with CVAC? Yes No
2. Do you have a valid driver's license? Yes No If yes, class _____
3. Do you have daily access to a vehicle (applicable to some positions)? Yes No
4. Do you have Standard First Aid? Yes No
5. Do you have Basic Cardiac Life Support (BCLS/CPR Level C)? Yes No
6. Have you completed the National Coaching Program (NCCP)? Yes No
7. Do you have a Paddle Canada Certification? Yes No

EXPERIENCE/TRAINING

SECTION 5

Indicate any experience working/volunteering or education/ training in the following areas:

- Children aged 5 – 12 years
- Youth ages 13 -18 years Adults
- Working with persons with a disability or special needs
- Knowledge of child development
- Behaviour management, crisis intervention, ABA therapy training
- Facilitating training, supervising/evaluating staff, leadership
- Planning and coordinating children's programs
- Other relevant experience/training or certification

EDUCATION

SECTION 6

If currently enrolled in High School, what grade level will you complete this year? _____

Educational Institute	Program of Study	Date (yyyy-mm-dd)	Certificate/Degree/Diploma

WORK EXPERIENCE (attached letters of reference from previous employers if available)

SECTION 7

Previous Employer	Dates Employed	Position/Responsibilities

REFERENCES (Employment related references are preferred. Do not list relatives or friends.)

SECTION 8

I hereby authorize the Codiac Vikings Aquatic Club to contact the persons or organizations listed on this application and/or my resume for the purpose of obtaining reference information, including contents of my personnel file. The following individuals are authorized to disclose such information.

Name of Reference	How do you know this reference?	Contact information for Reference <i>(Please indicate home #, work # and email)</i>

For employment reference, may we approach: Your present employer? Yes No Your former employers? Yes No

CHECK LIST (check each item to ensure it is enclosed with application)

SECTION 9

- Current Resume
(Attach the following if completed and current)
- Standard First Aid Certificate
- CPR (Level C) Certificate
- Any other certification (i.e., tennis, soccer, coaching (NCCP))

I acknowledge that employment and continuing employment are conditional upon observance of the rules, regulations and instructions governing employment by the Codiac Vikings Aquatic Club as in effect at the time of employment, or established at any subsequent time.

I am available for the period of employment indicated in the job descriptions of the positions for which I have applied. I understand that many positions require physical agility and constant mobility.

It is understood and agreed that the information given on this application is true to the best of my knowledge, and any misrepresentation made by me may be sufficient cause for immediate dismissal.

I understand that applications will only be accepted and retained for advertised competitions and only those granted interviews will be contacted.

Applicant's signature _____ **Date (yyyy-mm-dd)** _____