

**City of Flatonia  
Application for Employment  
2025 Lifeguard**

**Mandatory Training Dates: May 3-4\* at Weimar City Pool**  
**\*You must be available on these dates if you are not certified.**

**PERSONAL INFORMATION**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Phone # \_\_\_\_\_ Email \_\_\_\_\_

List the names of any current City of Flatonia employees you are related to, if any:  
 \_\_\_\_\_

Have you ever been convicted of a crime (do not include minor traffic violations)?  
 \_\_\_\_\_

Do you have any physical limitations that require special assistance to perform the duties assigned with your employment as a lifeguard?  
 \_\_\_\_\_

**RECORD OF EDUCATION**

	Name of School	Years Attended	Year of Graduation	Diploma/Degree
High School				
College				
Trade School				
Other				

**REFERENCES** – Please do not include family members.

Name	Phone #	Relationship

**RECORD OF EMPLOYMENT**

<b>Employer Name</b>		<b>Start Date</b>	<b>Start Wage</b>
<b>Employer Address</b>			
<b>Employer Phone #</b>		<b>End Date</b>	<b>End Wage</b>
<b>Supervisor's name</b>			
<b>Describe the work you performed:</b>			

<b>Employer Name</b>		<b>Start Date</b>	<b>Start Wage</b>
<b>Employer Address</b>			
<b>Employer Phone #</b>		<b>End Date</b>	<b>End Wage</b>
<b>Supervisor's name</b>			
<b>Describe the work you performed:</b>			

<b>Employer Name</b>		<b>Start Date</b>	<b>Start Wage</b>
<b>Employer Address</b>			
<b>Employer Phone #</b>		<b>End Date</b>	<b>End Wage</b>
<b>Supervisor's name</b>			
<b>Describe the work you performed:</b>			