Please show your top 3 job position preferences with numbers 1,2, and 3.

Cemetery

Cemetery Maintenance

Concessions

Manager (18 or over)
Attendant (14 or over)

Franklin Family Aquatic Center

Assistant Manager
Guest Services Cashier
Head Lifeguard (15 or over)

Lifeguard	(15 or over)
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Lifeguard	(Ind	loor)

Sub Lifeguard (15 or over)

Indoor Aquatics

	Swim Lesson Coordinator
	Swim Lesson Instructor
C	Indoor Lifeguard (15 or over)

Kickapoo Kids Camp

Coordinator	(18 or over)
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Counselor (18 or over)

Park Operations

- Park Maintenance
 Landscape Maintenance
- Weekend Supervisor

Recreation/Fitness Center

ront Desk Attendant
Recreation Ctr Supervisor
itness Supervisor

	Facility	Rental	Super	visor
_				

	Aerol	oic/Class	Instructor

Custodian

Other_

*Must be 18 years or older to apply for manager positions

* Must be 15 years or older to apply for lifeguard positions

* Must be 14 years or older to apply for concession attendant



Franklin Parks & Recreation Part Time/Seasonal Application

An Equal	Opportunity	Employer
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ddress (Street) mail Address SCHOOL	(City)	(State) Phone ((Zip)
(Street) mail Address	(City)	. ,	
		Phone ()
SCHOOL	NAME & ADDRESS		
		DATES ATTENDED	MAJOR DEGREE
High School			
College			
Technical or other			
ist special skills or qua	lifications:		
igh School Equivalenc	cy Diploma (GED) obtained	, if so where?	
irst available day to be	egin work:		
st any job related volu	inteer work, hobbies, or me	mberships:	
ave you worked for th	e City of Franklin before?	In what position?	
-	-	not been expunged as permi	tted by law?

EMPLOYMENT HISTORY (List most recent or present place of employment first)

Employer		Employer
Address		Address
Telephone ()		Telephone ()
Hourly Wage/Salary		_ Hourly Wage/Salary
Dates employedto		Dates employedto
Position		Position
Name of Supervisor		Name of Supervisor
May we contact all previous employers?	Explain:	

REFERENCES (In addition to any work references above, please add two personal references that are not relatives.)

Name	Name
Address	Address
Telephone ()	Telephone ()

I certify that all of the above information contained in this application is correct to the best of my knowledge. I agree that any misrepresentation or omission of facts may result in disciplinary action or dismissal. I further understand and authorize, as a condition of employment, that I must submit to a drug test and allow the City of Franklin to conduct a background search. I authorize the City of Franklin, its agents and employees to coordinate and conduct the afore mentioned background search and testing. I understand that my employment will not begin until satisfactory results are obtained by the City. In addition, I hereby release and indemnify the City of Franklin, its agents and employees, or agencies from whom the information is requested or released, from any liability of any kind or nature of responsibility or for any damages that at any time may occur from conducting a criminal record or background search of the employee or applicant. This release of all liability and responsibility includes, but is not limited to, all discussions with past or present employers, friends, criminal record check, credit checks, license checks or drug testing.

Pre-employment drug screen is mandatory!

A copy of this document shall be as valid as the original.

Applicant's Signature_____

Applicant Name (Printed)_____

The City of Franklin does not discriminate in hiring or employment on the basis of race, color, religion, national origin, age, sex, or disability.

FOR LIFEGUARD APPLICANTS ONLY Are you certified? _____ When does your certification expire? _____

Please return application to FranklinJobs@franklin.in.gov or mail to: