

**NORTH CASTLE RECREATION & PARKS DEPARTMENT  
APPLICATION FOR EMPLOYMENT – POOL AND AQUATIC STAFF**

40 Maple Avenue, Armonk, NY 10504

(914) 273-3325

FAX (914) 273-2139

[mtrainor@northcastleny.com](mailto:mtrainor@northcastleny.com)

Name \_\_\_\_\_

Email Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Age (under 18) \_\_\_\_\_

**EDUCATION      NAME & LOCATION      COURSE/MAJOR DEGREE      YRS. COMPLETED**

High School \_\_\_\_\_

College or \_\_\_\_\_

Business School \_\_\_\_\_

Graduate or \_\_\_\_\_

Professional School \_\_\_\_\_

**EMPLOYMENT HISTORY (last 5 years)**

Name and Address of Employer	From Mo/Yr	To Mo/Yr	Kind of Work or Position	Salary	Reason for Leaving	Phone No.
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\_\_\_\_\_  
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**CERTIFICATIONS (Check all that apply. Submit copies with this application)**

Lifeguard Training- Exp. Date: \_\_\_\_\_  \*CPR/AED for Pros- Exp. Date: \_\_\_\_\_

WSI- Exp. Date: \_\_\_\_\_  CPO- Exp. Date: \_\_\_\_\_  EMT- Exp. Date: \_\_\_\_\_

Lifeguard Management- Exp. Date: \_\_\_\_\_  LG Instructor- Exp. Date: \_\_\_\_\_

Other (list and provide Exp. Dates): \_\_\_\_\_

\*CPR/AED for Professional Rescuers and Healthcare Providers MUST be renewed ANNUALLY; certs may not be over 1 year old.

Have you ever been convicted of a felony, misdemeanor or violation? \_\_\_\_\_ (If yes, explain on back)

Have you ever applied to or worked for North Castle Recreation? \_\_\_\_\_

I affirm that all statements made on this application (including any attached papers) are true under the penalties of perjury. (Applicants are advised that all statements made by them in connection with their application(s) for employment are subject to investigation and verification). Pursuant to 210.45 of the New York State Penal Law, it is a crime punishable as a Class "A" misdemeanor to knowingly make a false statement herein.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or Guardian's Signature (if under age 18) \_\_\_\_\_ Date \_\_\_\_\_