
NEW OCEAN LIFEGUARD GENERAL INFORMATION

Lifeguard Requirements:

1. New Lifeguards may not have used tobacco or tobacco products within the past 12 months.

ALL LIFEGUARD APPLICANTS MUST BE AVAILABLE TO WORK WEEKENDS AND ALL HOLIDAYS. NO VACATION TIME WILL BE PERMITTED FROM JULY 10TH-14TH 2019. NO EXCEPTIONS

2. There will be two test dates for potential applicants. You **ARE REQUIRED** to report to one of the following test dates:
 - March 17, 2019 at 11:00 a.m. at Fletcher Senior High School pool
 - March 31, 2019 at 11:00 a.m. at Fletcher Senior High School pool
 - a. You will be required to complete an application along with a W-4 Form and an I-9 Form. **Please bring copies of your current driver's license and social security card.**
 - b. You will be required to complete two physical fitness tests consisting of a pool swim test and an ocean swim/run test. The pool swim test requirement is to swim 500 meters (550 yards) in the pool in 10 minutes or less. After successfully completing the pool swim test, applicants will report to the beach in front of the Atlantic Beach Lifeguard Station, 1 Ahern Street, Atlantic Beach, for the ocean swim/run test. The ocean swim/run test consists of running approximately 1/2 mile on the beach with buoy, entering the ocean, swimming approximately 1/2 mile in the ocean while towing a buoy, exiting the ocean and returning to the starting point in 30 minutes or less.
3. Background check.
4. Interview.

If selected, post-employment requirements:

1. Physical examination to include a drug test by urinalysis with an optional Hepatitis B Vaccine.
2. Must successfully complete and maintain the requirements for an Open Water Lifeguard per USLA, *Guidelines for Open Water Lifeguard Agency Certification*. This is an approximately 48 hour classroom and on-the-job training taught by Atlantic Beach free of charge. Lifeguards will be paid while attending this course.
3. Lifeguards without a First Responder certificate must obtain a First Responder certificate prior to continued lifeguard employment. A First Responder class of approximately 43.5 hours is offered by Atlantic Beach with classes normally held at night or on weekends. Lifeguards may obtain a First Responder certificate by completion of this class or they may obtain a First Responder certificate through other training offered in the Jacksonville area. If required, a CPR certificate will also be obtained during First Responder training. Lifeguards will not be paid while attending

this course.

Note: Above requirements may be modified for returning lifeguards.

NEW OCEAN LIFEGUARD EMPLOYMENT APPLICATION

INSTRUCTIONS

*If you previously worked the 2018 beach season, **STOP**. This is the wrong application form.
Please contact Lifeguard Captain John Phillips for a Returning Guard application.*

The City of Atlantic Beach has an employment policy that requires all new applicants to certify that they have not used tobacco products during the past 12 months and will not utilize tobacco while employed. If you have utilized any tobacco products during the past 12 months, you are not eligible for employment.

Using a typewriter or legibly printing in black ink, fill out this application completely and accurately. If space provided is inadequate, add additional pages and identify responsive information by item number. If an item does not apply to you, indicate by entering N/A. Do not leave any item blank.

NOTE: *All responsive statements are subject to verification and any incorrect statements may bar or remove you from employment. Truthful statements to any item herein requested will not necessarily exclude you from employment consideration for a specific position unless contrary, prohibited, or controlled by law or otherwise places you in a nonconforming status with job related policies and standards as established by the City of Atlantic Beach.*

PERSONAL INFORMATION

1. Name: _____

2. Nicknames or Aliases: _____

3. Social Security #: _____

4. Are you at least 16 years of age (As of May 1, 2019): _____

5. Mailing Address: _____

Street

City

State

Zip Code

6. Current Address _____

Street

City

State

Zip Code

E-Mail Address _____

7. Phone #: Primary (____) _____ Secondary (____) _____

8. Have you previously worked for the City of Atlantic Beach in the capacity of a lifeguard?
Mark one. Yes No If yes, please list dates _____

9. Height _____ Weight _____ Waist Size _____
(The above requested information is used for the ordering of swimwear only.)

WORK EXPERIENCE:

List all of the jobs you have held in the past pertaining to lifeguarding, water safety and/or first aid. Be specific give details. If no such jobs exist, list any other previous employment.

Present Employer:

Area Code and Phone # : () _____ May We Contact? _____
Title/Position Held _____ Supervisor _____
Date of Employment: From _____ to _____
Reason For Leaving: _____

Previous Employer:

Area Code and Phone # : () _____ May We Contact? _____
Title/Position Held _____ Supervisor _____
Date of Employment: From _____ to _____
Reason For Leaving: _____

Previous Employer:

Area Code and Phone # : () _____ May We Contact? _____
Title/Position Held _____ Supervisor _____
Date of Employment: From _____ to _____
Reason For Leaving: _____

Previous Employer:

Area Code and Phone # : () _____ May We Contact? _____
Title/Position Held _____ Supervisor _____
Date of Employment: From _____ to _____
Reason For Leaving: _____

List, and attach, copies of any lifeguard certifications, emergency medical training, and certificates that you have attained

List driver's license information and attach a copy:

DL Number: _____ State: _____ Expiration Date: _____

*for all positions without regard to race, color, age, gender, religion, national origin, disability,
marital status or any other non-merit factor.*

APPLICANT'S STATEMENT

I UNDERSTAND AND VOLUNTARILY AGREE as a condition of employment or my continued employment, that I may be requested by the City of Atlantic Beach to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for employment, or if I am then employed, may result in my immediate dismissal.

I certify that the foregoing answers are true and correct to the best of my knowledge. I authorize the investigation of all statements contained in this application and hereby give permission to contact schools, previous employers, references, and others, and hereby release the City of Atlantic Beach from any liability as a result of such contact. I understand that any false or misleading information or omissions of facts requested in this application or interview may remove me from further consideration for employment. In addition, if employed, any false or misleading statement or omission of fact called for in this application may be cause for subsequent dismissal at any time without any previous notice.

I have read and understand the requirements listed above. If selected to participate in the employment process, I agree to comply with all requirements. I hereby certify that all statements made in this questionnaire are true and complete and understand that any misstatements of material facts will subject me to disqualification or dismissal.

All lifeguards must be available to work all holidays, weekends and the week between July 10-14.
By signing this agreement you have verified that you will be available to work during the above stated.

I ___ have ___ have not read the job description for Life Guard and certify that I am able to perform all the essential job functions or

I ___ have ___ have not read the job description for Life Guard and certify that I am able to perform all the essential job functions if provided with the following accommodations: _____

Signature in Full

Date Completed

Full Name Printed

**CITY OF ATLANTIC BEACH
OPTIONAL
EEO SURVEY**

Completion of this form is ***OPTIONAL***. The following information will be used for Equal Employment Statistical information and identification purposes only. This form will be detached and not processed/provided with application form.

It would be helpful if you provided the following information.

Name: _____

Position Applied for: ***Ocean Lifeguard***

Ethnic Background:

- | | |
|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Black |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Other (specify) |

Gender: Male Female

Date of Birth: _____

Veteran Yes No

Marital Status: Married Single Divorced

Do you have a disabling or handicapping condition? Yes No

REFERRAL SOURCE

(Please indicate how you became aware of this job)

- | | |
|---|---|
| <input type="checkbox"/> <i>Florida Times Union</i> Newspaper | <input type="checkbox"/> Atlantic Beach City Employee |
| <input type="checkbox"/> <i>Shorelines</i> Newspaper | <input type="checkbox"/> Walk In |
| <input type="checkbox"/> <i>Beaches Leader</i> Newspaper | <input type="checkbox"/> Other |
| <input type="checkbox"/> City of Atlantic Beach Web Page | |
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