VILLAGE OF WOODVILLE
SEASONAL EMPLOYMENT APPLICATION

POSITION APPLYING FOR:_____

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NAME - LAST:_____**FIRST:**_____**MIDDLE:**_____

ADDRESS:_____**CITY:**_____**STATE:**_____**ZIP:**_____

HOME PHONE #_____ **CELL #**_____ E-MAIL_____

EDUCATION: HIGH SCHOOL_____GRADE COMPLETED_____

COLLEGE_____YEARS COMPLETED:_____

EMPLOYMENT HISTORY (USE BACK IF ADDITIONAL SPACE IS REQUIRED):

EMPLOYER	ADDRESS	PHONE #	SUPERVISOR	POSITION
_____	_____	_____	_____	_____
		DATES: FROM_____TO_____		
_____	_____	_____	_____	_____
		DATES: FROM_____TO_____		
_____	_____	_____	_____	_____
		DATES: FROM_____TO_____		

REFERENCES:

NAME	ADDRESS	PHONE #
_____	_____	_____
_____	_____	_____
_____	_____	_____

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POOL APPLICANTS ONLY:

ARE YOU ABLE TO ATTAIN THE CERTIFICATIONS REQUIRED FOR THIS POSITION? ____YES___NO

CERTIFICATIONS FOR POOL APPLICANTS ONLY:

ADVANCED LIFE SAVING EXPIRATION DATE:_____ **(ATTACH COPY)**

WATER SAFETY INSTRUCTOR EXPIRATION DATE:_____**(ATTACH COPY)**

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The above statements are true and complete to the best of my knowledge. If offered a position I am aware a background check will be performed and a physical may be required. I understand that if employed, falsified statements will be cause for immediate dismissal. The Village has my permission to contact any persons on this list unless I so state on the above application.

SIGNED:_____DATE:_____