City of Tonasket

Lifeguard Job Description

TITLE:

Lifeguard

REPORTS TO:

Pool Manager

FUNCTION:

Lifeguard as Schedule Requires

Other Duties pertaining to pool and the facility

REQUIREMENTS:

Current Rd Cross Lifeguard Certification

Current First Aid Certification Current CPR Certification Current AED Certification

16 years of age

Pool Policies/Guarding:

- A. Maintain a safe environment in pool area by knowing all emergency procedures and knowing and consistently enforcing pool rules and policies.
 - No running
 - No shoulder rides
 - Face out jumps only (cannonball only in 5' or deeper area)
 - No jumping on anyone
 - No hanging on lane ropes
 - No kicking other people (underwater included)
 - No dunking
 - No pushing/pulling people into or out of water
 - No swearing
 - No swinging or jumping from ladders
- B. Guards are to be vigilant and constantly watching swim pool whether in the lifeguard chair or walking in their specific area.
- C. You are responsible for your shift, if you have a conflict it is your responsibility to find a sub and inform the Pool Manager who the sub is and to ensure that the sub will be there to fill your shift. Excessive use of substitutes may result in dismissal.

Public Relations:

- A. Look professional
- B. Act professional

- C. Be courteous
- D. Be informed and knowledgeable about the Pool schedule and programs
- E. Make every effort to provide good customer service to participants and parents
- F. Be dependable and reliable

General:

- A. Be on time
- B. Attend all scheduled trainings and meetings
 - These update and refines your emergency response skills
 - Ongoing training increases personal and team skills through training with the Pool Manager
- C. Complete Daily Log Sheets
 - Log sheets for open swim, family swim and lap swim numbers
 - · Chemical readings of pool, log results, inform Manager of any problems
 - Make accurate and complete written reports of any and all medical and non-medical incidences immediately after their occurrence.
 - Report any faulty equipment or facility problems (including incident reports) to either the Pool Manger or City Staff, (Clerk, Public Works)
- D. Each Staff Member is responsible for:
 - · The safety of all patrons using the pool facility
 - Their own actions (or inaction's) and job performance
 - Community members returning/not returning to classes due to dissatisfaction
 - Community members feeling secure and having confidence in the City staff
 - · Setting good examples for other staff and community members
 - Lifeguards are responsible for the cleaning of the facility—the restrooms, changing rooms etc.
- Cell phones are not to be used during work hours except during scheduled breaks.

This job description is intended to provide an overview of the requirements of the position. As such, it is not necessarily all inclusive, and the job may require other essential and/or non-essential functions, tasks, duties, or responsibilities not listed herein. Management reserves the sole right to add, modify, or exclude any essential or non-essential requirement at any time with or without notice.

City of Tonasket P. O. Box 487 Tonasket, WA. 98855

Phone 509-486-2132 Fax 509-486-1831

Application for Employment

	(Please	print plainly)		
Date of Application	on:	Social Security No		
Name				
L	ast First	Middle Ini	tial	
Address:		_ City	State	Zip
Telephone ()_	Message ()		Work ()	
Have you ever be	en employed by us before? Yes () No () If yes, give	dates:	
Relatives Employe	ed by the City:			
Relationship:		Department:		
Position Desired: _		Pay Expected: \$		-
Would you work or	vertime if asked? Yes No			
When will you be a	available to begin work?	Driver's Lid	cense#	
Are you legally elig	gible for employment in the USA?	State age i	if under 18 or o	ver 70
	ment requires swimsuit size			
EDUCATION				
	Name and Address of School	Course of Study	Years Completed	Diploma or GED
Elementary School			·	
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include any job-related military service assignments and volunteer activities.

Employer's Name:		From:	To:	
Address:		Supervisor:		
Phone: ()	Hours worked Per Week:		Starting Salary:	
Position:		Last Salary	:	
Number of Employees S	upervised by You:			
Reason for Leaving:				
Primary Duties:				
Employer's Name:		From:	То:	
Address:		Supervisor:		
Phone: ()	Hours worked Per Week:	S	tarting Salary:	
Position:		Last Salary:		
Number of Employees Su	pervised by You:			
Reason for Leaving:				
Primary Duties:				
Employer's Name:		From:	То:	
Address:		Supervisor:		
hone: ()	Hours worked Per Week:	St	arting Salary:	
osition:		Last Salary:		
lumber of Employees Sup	pervised by You:			
eason for Leaving:				
			,	

Attach an additional sheet if necessary

ADDITIONAL INFORMATION Describe any specialized training, apprenticeship, skills and extra-curricular activities. Describe any job-related training received in the United States military. _____ List professional, trade, business, or activities and offices held. Summarize special job-related skills and qualifications acquired from employment or other experience. State any additional information you feel may be helpful to us in considering your application. PERSONAL REFERENCES (No Relatives) 1. (Name) Phone No. 2. (Name) Phone No. 3. (Name) Phone No. 4. (Name) Phone No.

Have you ever used an illegal substance? Yes No				
If yes, what substance(s)				
When was the last time you used?				
Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, in				
the past ten years which has not been annulled or expunged or sealed by a court?				
If yes, explain in full				
In consideration of the City of Tonasket permitting me to apply for this position, and further processing my application, I hereby authorize the City to perform a background investigation on me. I hereby release, hold harmless and indemnify, from any and all liability for damages, all persons who may provide such information to the City. I further waive any rights that I may have to discover or demand the results of said background investigation and any materials obtained during or related to or apply to my heirs, assigns and any other persons claiming through me.				
To the best of my knowledge, the information herein is true and complete. I understand that falsification of this application will be grounds for elimination from further consideration, or, if employed, for dismissal at any time. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me.				
Further, I understand that at time of hire I will be required to provide documentation showing authorization to work in the United States.				
Signature of applicant Date				