

Application for Returning Employees

Date: _____ Date of Birth: _____

Name: _____ Age June 1st: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ Cell Phone: (____) _____

Summer Address: _____

City: _____ Zip Code: _____ Phone: (____) _____

Did you work till Labor Day of previous year? _____ If no, till what date? _____

Salary Desired: _____

Please **choose** job(s) applying for below **in order 1, 2, 3.**

- _____ Ride Attendant
- _____ Certified Lifeguard
- _____ Cashier
- _____ Snack Bar

*Note: Please number the above do not check or x. With 1 being your 1st choice.

Are you looking for _____ Full time (5 shifts per week up to 40 hours)

_____ Part time (2 to 4 shifts per week 20-32 hours)

Are you a full time student? _____

If yes, what school do you attend? _____

What day does school end? _____

What date will you be available to start work? _____

What is the last date you can work till? (The park is open till Labor Day)

Do you need time off for vacations or sports activities? _____
(Any unauthorized time off is considered unscheduled leave)

If yes, please list dates: _____

(You are required to find coverage for any and all dates you request off)

Who can we contact in an emergency? Name, relationship and Phone #

I certify that the facts contained in this application are true and complete to the best of my knowledge. I give Water Wizz of Cape Cod my authorization to utilize all information given. I understand that Water Wizz will use this information to investigate previous employment. I release the company from all liability for any damages that may result from such information. Water Wizz of Cape Cod, Inc. is an Equal Opportunity Employer.

Signature: _____ Date: _____