

WINDING TRAILS, INC. APPLICATION FOR DUNNING LAKE SEASONAL JOBS

Position Applying for: <input type="checkbox"/> Waterfront Director	<input type="checkbox"/> Assistant Waterfront Director	<input type="checkbox"/> Lifeguard
<input type="checkbox"/> Water Safety Instructor	<input type="checkbox"/> Sailing Instructor	<input type="checkbox"/> Boat Attendant
<input type="checkbox"/> L.I.T.-Lifeguard in Training	<input type="checkbox"/> Program Staff	<input type="checkbox"/> Grill Staff

Name:	Date:
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Address:

City:	State:	Zip:
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Home phone:	Cell phone:	E-mail:
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School or University:	Address:
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Major:	Minor:	Phone at school:
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Dates Attended:	Date Graduated:
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Red Cross Certifications: Please Check all that apply and fill in expiration date where necessary.

<input type="checkbox"/> Lifeguard Training	Expires: _____	<input type="checkbox"/> Lifeguard Instructor Trainer	Expires: _____
<input type="checkbox"/> Water Safety Instructor	Expires: _____	<input type="checkbox"/> Water Safety Instructor Trainer	Expires: _____
<input type="checkbox"/> Waterfront Module		<input type="checkbox"/> Lifeguard Management	
<input type="checkbox"/> First Aide	Expires: _____	<input type="checkbox"/> CPR	Expires: _____
		<input type="checkbox"/> AED	Expires: _____
<input type="checkbox"/> Canoeing		<input type="checkbox"/> Basic Sailing	
<input type="checkbox"/> Other certifications:			

Dates available to work (from when to when?):

Tell us about yourself

Are you: <input type="checkbox"/> 16 years or older <input type="checkbox"/> 18 years or older <input type="checkbox"/> 21 years or older	Do you have a valid driver's license? <input type="checkbox"/> Yes or <input type="checkbox"/> No
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Any previous experience related to the position you are applying for? <input type="checkbox"/> Yes or <input type="checkbox"/> No

If yes, Please give details:

Indicate any special skills and interests related to the position you are applying for:

Please list any Clubs/Sports/Other Activities:
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Please describe any awards or special recognition that you have received at work, school, or as a volunteer:
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Please describe something that you've done at work, school, or volunteering that you are especially proud of.

Also, if you have a resume, please attach it.

For further information on Winding Trails, Inc. please visit our website at www.windingtrails.org

Please return application to Winding Trails, Inc. 50 Winding Trails Drive Farmington, CT 06032,
Fax: (860) 674-9407, or email rayae@windingtrails.org