



THE CORPORATION OF THE TOWN OF DEEP RIVER

APPLICATION FOR STUDENT EMPLOYMENT

PLEASE PRINT:

Name: _____
Address: _____
Telephone: () _____ Email: _____
Present Education Status: _____
Do you hold a valid CPR First Aid Qualification: Yes _____ No _____

Please check the positions you are applying for:

Recreation

Arts Camp Leaders _____
Summer Program Coordinator _____
Administrative Assistant _____
Sports Camp Leaders _____
Playground Leaders _____
Science Camp Leader _____
Parent & Tot Soccer Leaders _____
Ball Hockey Leaders _____

Public Works

General Student Laborer _____
Marina Attendants _____
Facility Maintenance _____

Aquatics (Please complete section 2)

Lifeguard _____
Instructor _____

Please attach Resume with application and include three references.

Thank you for your interest in the Town of Deep River. Only applicants selected for an interview will be contacted. Accessibility accommodations are available for all parts of the selection process. Applicants must make their needs known in advance. Information collected will be managed in accordance with the Municipal Freedom of Information and Protection of Privacy Act.

In signing this application, I understand that any misrepresentation or false information on this application form or resume may disqualify me from my employment or cause my immediate dismissal. Successful candidates will be required to submit a criminal records check.

Return with resume to:

**The Town of Deep River
P.O. Box 400
Deep River ON K0J 1P0**

Or

By email to townmail@deepriver.ca

Date: _____

Signature: _____

**Section 2
(To be completed for Aquatics applications only)**

	Date of Original Certification	Date of last Re- certification	Certification I.D. Number
Bronze Cross			
Standard First Aid - Level "C"			
NLS - Pool			
NLS - Waterfront			
Red Cross Water Safety Instructor			
Lifesaving Instructor			
Lifesaving Examiners			
I Can Swim Instructor			
Aquafitness Instructor			
SCUBA*			
Please specify any additional awards or certifications			
Copies of all certifications must accompany this application.			

I certify that the above information is a true and accurate account of my aquatic qualifications.

Date: _____

Signature: _____