



**INDEPENDENT SCHOOL DISTRICT 196
Community Education Aquatics Program**

Pat Bennett, coordinator

1540 Deerwood Drive, Eagan, MN 55122

Phone 651-683-6879 Fax 651-683-8580

Email: aquatics@district196.org

Dear Applicant,

Thank you for your inquiry into a position with the District 196 Aquatic Program. The aquatic program is a fun place to work and offers flexibility for you. The major emphasis of the program is swim lessons. We also offer water exercise, open swims and a few other miscellaneous aquatics programs.

Training Information:

There are two levels of certification to teach American Red Cross swim lessons: Water Safety Assistant (WSA) and Water Safety Instructor (WSI). The WSA certification allows one to assist in teaching swimming lessons. One may be employed by District 196 at the age of fourteen but the WSA certification may be earned prior to the age of fourteen. The WSI certification is a higher level of training and certifies one to teach all Red Cross swim levels.

Water Safety Aide (WSA) certification can be earned in two different ways. The preferred method is through taking the Water Safety Aide course. An alternative method of training is through our hands-on training program consisting of twenty hours of hands-on training. Call our office with questions about class offerings.

Water Safety Instructor (WSI) certification may be earned through a class and the minimum age to take the course is sixteen. The course is offered through the American Red Cross. You may call our office for WSI certification information.

Lifeguard certification is required for the job of lifeguarding. This course is offered through our program. Call our office for current course information.

Employment Information:

Call the Aquatic Program Coordinator to schedule an interview. We will be happy to get you set up for any of the necessary trainings.

Sincerely,

Pat Bennett
Aquatic Program Coordinator



Personnel Application
District 196 Community Education
Aquatics Program
 1540 Deerwood Drive
 Eagan, MN 55122
 Phone 651-683-6879 Fax 651-683-8580

FORM C

Applicants are advised that tobacco use is prohibited in District 196 buildings, grounds and vehicles.

Independent School District 196 is an equal opportunity employer. Selection of applicants will be made without reference to race creed, color, sex, age, or national origin, disability, economic or marital status.

Area of Interest	
<input type="checkbox"/> Aquatics Staff <input type="checkbox"/> Building Supervisor <input type="checkbox"/> Instructor	<input type="checkbox"/> Child Care <input type="checkbox"/> Other (please specify)

I. Personal Information

Name in Full _____

Permanent Address _____

City _____ State _____ Zip _____

Telephone _____ Cell Phone _____ Work Phone _____

Present Address (if different) _____

City _____ State _____ Zip _____

Telephone _____

Are you legally eligible for employment in the United States? Yes No

If during the past five years you have been convicted of a crime for which a jail or prison sentence was or could have been imposed, place and "X" in this box and attach a separate sheet of details.

If there are any criminal charges or proceedings pending against you, place and "X" in this box and attach a separate sheet with details.

If you have been convicted of any offense involving the sexual molestation, physical or sexual abuse, or rape of a child, place and "X" in this box and attach a separate sheet of details.

Can you perform all the essential functions of the position(s) for which you are applying? Yes No

If not, could you perform all the essential functions with reasonable accommodations? Yes No

If yes, how _____

Have you ever been discharged for misconduct, unsatisfactory service or forced to resign from any position? Yes No

II. Educational Background

	NAME AND PLACE	COURSE OR MAJORS/MINORS	DIPLOMA/DEGREE	YEARS
HIGH SCHOOL				
UNDERGRADUATE				
GRADUATE				
SUMMER SCHOOL				
OTHER				

III. Work Experience

DATES FROM TO	NAME AND LOCATION OF EMPLOYER	POSITION HELD	SALARY

Reason for leaving present or last position _____

IV. References (Please type or print complete name and address, including zip code.)

NAME	ADDRESS	PHONE NUMBER

DATE _____ **SIGNATURE** _____

If you secure another position or no longer wish this application to be considered, please notify the Community Education Aquatics Program at 651-683-6879
Application consideration will be discontinued six months from date of application.



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AQUATICS
FORM

Additional Information

Name _____

Birth Date _____ - _____ - _____ Age _____

E-mail Address _____

School _____ Year of Graduation _____

Seasons Available

Fall Winter Spring Summer

Pool Preference

Pools used most frequently: BHMS SHMS

Pools used less frequently: DHMS FRMS RMS VMS

Days Available

Sun Mon Tues Wed Thurs Fri Saturday

Certifications

Water Safety Instructor (WSI) Lifeguarding or Waterpark Lifeguarding
 Water Safety Aide (WSA) First Aid
 Other: _____ CPR/AED for the Professional Rescuer
_____ CPR

Aquatics Experience: "A" = considerable experience, "B" = some experience

Recreational Swimming Supervising/Managing
 Fitness Swimming Coaching
 Competitive swimming Lifeguarding
 Diving Teaching
 Snorkeling Youth
 Scuba Adult
 Water exercise/aerobics Adaptive
 Synchronized swimming Lifeguarding / CPR
 Other:

Why would you like to join the ISD 196 pool staff? _____

Other information you would like to offer: _____

How did you hear about the District 196 Community Education Aquatics Program?
