

ACCEPTING APPLICATIONS

POOL MANAGER, SWIMMING INSTRUCTOR, LIFEGUARDS & CONCESSION STAND OPERATOR

Blossburg Borough is accepting applications for Pool Manager, Swimming Instructor, Lifeguards and Concession Stand Operator for the 2020 Swimming Pool Season.

Required Credentials for Pool Manager and Swimming Instructor: Valid American Red Cross First Aid, CPR Certifications, Act 34 and Act 114 Clearances.

Required Credentials for Lifeguards: Valid American Red Cross Advanced Life Saving and Water Safety Certification, Act 34 and Act 114 Clearances and Working papers if under 18 years of age.

Required Credentials for Concession Stand Operator: Act 34 and Act 114 Clearances and Working papers if under 18 years of age.

Applications for Employment may be picked up at the Blossburg Borough Office located at 241 Main Street, Blossburg, PA 16912 or on our website at www.BlossburgBorough.org/Forms.

DEADLINE FOR SUBMISSION IS APRIL 3, 2020.
ALL CREDENTIALS **MUST** BE SUBMITTED WITH THE APPLICATION.

Blossburg Borough Recreation Board



Recreation Board

Summer Employment Application – Community Pool

APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address			Apartment/Unit #		
City	State		ZIP		
Phone	E-mail Address				
Dates Available	From:	To:			
Position Applied for:					
Are you willing to work Saturday & Sunday	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many hours do you wish to work per week?		
If required for position, do you have a valid driver's license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If YES, State of issuance, license #, and expiration date:		
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for the Borough?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Reason for leaving?					
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:		

EDUCATION

High School	Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College	Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other	Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list three personal references.

Full Name	Relationship	
E-Mail	Phone	
Address		
Full Name	Relationship	
E-Mail	Phone	
Address		
Full Name	Relationship	
E-Mail	Phone	
Address		

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

CERTIFICATIONS

Do you have a valid Red Cross Water Safety Instructor Certificate? YES NO Expiration Date:

Do you have a valid Red Cross Lifeguarding Certificate? YES NO Expiration Date:

Do you have a valid Red Cross First Aid and CPR Certificate? YES NO Expiration Date:

List prior experience in swimming pool work and maintenance:

CLEARANCES

If hired you will be required to apply for a Pennsylvania Child Abuse History Clearance, Pennsylvania State Police Clearance and an FBI Clearance which will require being finger printed.

Are you willing to participate in receiving these clearances upon getting hired? YES NO If no, please explain:

IN CASE OF EMERGENCY PLEASE NOTIFY

Name	Relationship
Home Phone	Cell Phone

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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Employee's Withholding Certificate

▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**
 ▶ **Give Form W-4 to your employer.**
 ▶ **Your withholding is subject to review by the IRS.**

2020

Step 1: Enter Personal Information	(a) First name and middle initial	Last name	(b) Social security number
	Address		▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov .
	City or town, state, and ZIP code		
	(c) <input type="checkbox"/> Single or Married filing separately <input type="checkbox"/> Married filing jointly (or Qualifying widow(er)) <input type="checkbox"/> Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, when to use the online estimator, and privacy.

**Step 2:
Multiple Jobs
or Spouse
Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3–4); **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld ▶

TIP: To be accurate, submit a 2020 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependents	If your income will be \$200,000 or less (\$400,000 or less if married filing jointly): Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ _____ Multiply the number of other dependents by \$500 ▶ \$ _____ Add the amounts above and enter the total here 3 \$ _____		
Step 4 (optional): Other Adjustments	(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income	4(a)	\$ _____
	(b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here	4(b)	\$ _____
	(c) Extra withholding. Enter any additional tax you want withheld each pay period	4(c)	\$ _____

Step 5: Sign Here	Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.		
	▶ _____ ▶ Employee's signature (This form is not valid unless you sign it.)		▶ _____ ▶ Date

Employers Only	Employer's name and address	First date of employment	Employer identification number (EIN)
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