Auburn Municipal Pool Application

Last Name	e First Name			Middle Initial		Date of Birth
Address (Street Numb	t Number & Name) City State		Zip Code C		ell Phone Number	
Type of Employment:						
Full Time P *Applying for the Min		Asst. Mana equire life		Lifeguard ining.*	Mini-l	Inn
List any Red Cross Ce	ertifications you	currently	hold:			
Certification					Expiration	date:
Certification					Expiration	date:
	lling to get an Op	perators Lic assistant ma previously	cense? anager, you worked a	u do not need to co		nployment history section. Please uties & responsibilities line.
Position	Date	of Employ	yment		Name & A	address of Employer
ame & Title of Immediate Supervisor		Phone Number				
——————————————————————————————————————	nd Responsibiliti	es				
		onal informati	on which vo	u haliaya may halm y	on qualify for the	
certified on the Employme	nt Application. I dec	lare that my	answers ar		City of Auburn th	eposition(s) that you have applied for. An eright to investigate all information *

Please take your application to Auburn City Hall or email a copy of your application to auburnnebraskamunicipalpool@gmail.com by 2/07/2025. Shalee will get back to you as soon as possible about your interview process. ** Must be 15 years or older to apply for the lifeguarding position. 14 years or older to apply for the mini-inn.**