



Grass Run  
Industrial Park

Phone (419) 634-4045

# VILLAGE OF ADA

115 W. Buckeye Avenue  
P.O. Box 292 • Ada, Ohio 45810  
Website: [www.adaoh.org](http://www.adaoh.org)

Fax (419) 634-4065



Tree City USA

**LOOKING FOR A JOB THIS SUMMER? ARE YOU IN NEED OF EXTRA SPENDING CASH, MONEY FOR COLLEGE, OR JOB EXPERIENCE? THE ADA VILLAGE POOL MAY BE THE PLACE FOR YOU!**

**Are you fun-loving, yet hard working, responsible, and respectful?**

**Do you enjoy working with people, being outside during the summer months, and have 10-30 hours/week available? Do you have experience managing teens and young adults?**

**If this sounds like you, complete the attached application and return it to us! We would LOVE to consider you for employment at the Ada Pool this summer!**

**Available positions:** We are accepting applications for manager, assistant manager, lifeguards (certification as of opening day required), and cashiers. Previous employees are welcome to apply!

**2018 Dates:** The pool is scheduled to be open to the public **May 26th-August 11th** 7 days a week. **PLEASE KEEP THESE DATES IN MIND WHEN APPLYING!** Availability between these dates is required. **Please write down ANY dates you know you are NOT AVAILABLE TO WORK** in the appropriate section of the application.

**\*\*\*\*Manager and Assistant Manager Applications are due - March 26, 2018\*\*\*\***  
**\*\*\*\* Lifeguard and Cashier Applications are due - April 2, 2018\*\*\*\***

Completed applications may be returned in a few ways:

- 1.) Via US Mail - send your application to: Village of Ada, Attn: Human Resources, PO Box 292, Ada, OH 45810
- 2.) In person - you may bring your completed application in a sealed envelope marked "Attn Human Resources" to the Village Office, located at 115 W. Buckeye Ave, Ada, OH 45810
- 3.) Via email - you may email a scanned PDF copy of your signed application to Angela Polachek, Administrative Assistant, at [angelapolachek.ada@gmail.com](mailto:angelapolachek.ada@gmail.com). You will receive a reply email confirming receipt.

**Thank you for your interest in applying to work for the Village of Ada! We look forward to hearing from you!**  
**If you have any questions, please feel free to give us a call or send Angela an email.**

# VILLAGE OF ADA EMPLOYMENT APPLICATION

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, military status, or any other legally protected status.

Position Applying For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

How did you learn about this Position(s)?

- Newspaper: which one(s)? \_\_\_\_\_  Website: which one(s)? \_\_\_\_\_  
 Current Employee  Other, Please specify: \_\_\_\_\_

## WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Address: (Number) (Street) (City) (State) (Zip Code)

Telephone Number(s) Email Address (please list an email address you regularly check)

Best time to contact you at the telephone number provided is: \_\_\_\_\_ : \_\_\_\_\_ AM/PM

Date of birth (optional) : \_\_\_\_/\_\_\_\_/\_\_\_\_

If you are under 18 years of age, can you provide proof of your eligibility to work?  Yes  No

Have you ever been employed with us before?  Yes  No

If Yes, give date(s): \_\_\_\_\_

Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration Status?  Yes  No

*Proof of citizenship or immigration status will be required upon employment.*

List all previous addresses for the past three (3) years:

| Number and street | City | State and Zip Code | Dates From-To |
|-------------------|------|--------------------|---------------|
| Number and street | City | State and Zip Code | Dates From-To |
| Number and street | City | State and Zip Code | Dates From-To |

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Date available for work: \_\_\_\_\_ What is your desired salary range? \_\_\_\_\_

Are you available to work:  Full Time

Part Time

Are you currently on "lay-off" status and subject to recall?  Yes  No

Can you travel if a job requires it?  Yes  No

# EDUCATION/TRAINING

|                       | Name and Address of School | Course of Study | Years Completed | Diploma/Degree |
|-----------------------|----------------------------|-----------------|-----------------|----------------|
| High School           |                            |                 |                 |                |
| Undergraduate College |                            |                 |                 |                |
| Graduate Professional |                            |                 |                 |                |
| Other (Specify)       |                            |                 |                 |                |

Describe any specialized training, skills and extra-curricular activities:

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Please list below any valid certifications and/or licenses you currently hold, including Red Cross certifications. Please review the position's classification specification for which you are applying for position-specific required or recommended certifications and/or licenses.

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### ADDITIONAL QUESTIONS FOR POOL POSITION APPLICANTS:

Please list any planned summer activities:

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Please list any dates between May 26<sup>th</sup> and August 11<sup>th</sup> that you know you are not available to work:

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# EMPLOYMENT HISTORY

Start with your present or most recent job. Include any job-related assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disability, military status or other protected status.

|                               |            |   |  |                                 |
|-------------------------------|------------|---|--|---------------------------------|
| Employer                      |            | Dates Employed<br>From                      To            |  | Work Performed/Responsibilities |
| Address                       |            |   |  |                                 |
| Telephone Number(s)           |            | Hourly Rate/Salary<br>Starting                      Final |  |                                 |
| Job Title                     | Supervisor |   |  |                                 |
| Reason for Leaving            |            |   |  |                                 |
| May we contact this employer? |            |   |  |                                 |
| Employer                      |            | Dates Employed<br>From                      To            |  | Work Performed/Responsibilities |
| Address                       |            |   |  |                                 |
| Telephone Number(s)           |            | Hourly Rate/Salary<br>Starting                      Final |  |                                 |
| Job Title                     | Supervisor |   |  |                                 |
| Reason for Leaving            |            |   |  |                                 |
| Employer                      |            | Dates Employed<br>From                      To            |  | Work Performed/Responsibilities |
| Address                       |            |   |  |                                 |
| Telephone Number(s)           |            | Hourly Rate/Salary<br>Starting                      Final |  |                                 |
| Job Title                     | Supervisor |   |  |                                 |
| Reason for Leaving            |            |   |  |                                 |
| Employer                      |            | Dates Employed<br>From                      To            |  | Work Performed/Responsibilities |
| Address                       |            |   |  |                                 |
| Telephone Number(s)           |            | Hourly Rate/Salary<br>Starting                      Final |  |                                 |
| Job Title                     | Supervisor |   |  |                                 |
| Reason for Leaving            |            |   |  |                                 |

**If you need additional space, please continue on a separate sheet of paper.**

List professional, trade, business or civic activities and offices held.  
*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, military status or other protected status.*

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# ADDITIONAL INFORMATION

**SKILLS:**

Summarize special job-related skills and qualifications acquired from employment or other experience.

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**SPECIALIZED SKILLS:**

Include equipment-operated skills, i.e., computer, motorized equipment. Please review the position's classification specification for which you are applying for position-specific skills and equipment used.

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State any additional information you feel may be helpful to us in considering your application:

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**Note to Applicants:** DO NOT ANSWER THE FOLLOWING QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the essential functions of the job or occupation for which you have applied?  Yes  No  
A review of the essential functions of such a job or occupation has been given?  Yes  No

**REFERENCES:**

1. \_\_\_\_\_  
(Name) (Telephone Number)  
\_\_\_\_\_  
(Address)
2. \_\_\_\_\_  
(Name) (Telephone Number)  
\_\_\_\_\_  
(Address)
3. \_\_\_\_\_  
(Name) (Telephone Number)  
\_\_\_\_\_  
(Address)

# APPLICANT'S STATEMENT

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I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 30 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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Signature of Applicant

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Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Position(s) Applied For is Open:  Yes  No

Position(s) Considered For: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview:  Yes  No

Remarks: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Interviewer Date

Employed:  Yes  No

Date of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_

Department: \_\_\_\_\_

Hourly Rate/Salary: \_\_\_\_\_

By: \_\_\_\_\_  
Name and Title Date