



JOB OPPORTUNITY

Job Title: Aquatics Director

Starting Salary: Promotional Rate is \$36.05 per hour with benefits pursuant to the collective bargaining agreement

Hours of Work: 37.5 hours per week, pursuant to the collective bargaining agreement.

Position Purpose:

The purposes of this position are to implement, administer, and supervise aquatics program for the Parks and Recreation Department which includes an indoor pool and outdoor pond. She/he also evaluates the needs of the various populations it serves and seeks out new ideas and methods to provide the appropriate services. The Aquatics Director is required to exercise considerable judgment in administering and managing the aquatic programs and is responsible for maintaining and improving upon the efficiency and effectiveness of all areas under his/her direction and control.

Overall Responsibilities Include:

- Plans, organizes, initiates and directs aquatic activities in the department and evaluates the effectiveness of programs and needs of the community; develops short-term and long-range capital needs for the aquatic's programs
- Supervises and oversees the operation of indoor pool and outdoor pond including the scheduling of events, classes, competitive swimming and programs; coordinating schedule with Board of Education; scheduling staff; scheduling maintenance; training staff; distributing and ordering supplies and equipment.
- Oversees the contract management, care and maintenance of playground seasonally, pool courtyard, indoor pool and outdoor pond facilities including daily chemical treatment; daily chemical testing; training staff how to conduct chemical tests; understanding the pool equipment and types of maintenance to be conducted; contracting with vendors for repair, cleaning and maintenance of facilities; may handle minor repairs. Orders chemicals, & paper supplies.
- Reviews and develops warranted operating procedures for the use of outdoor pond facilities and indoor pool with approval from department director; develops safety practices for use of all facilities and programs; provides appropriate safety training.
- Assures safe working conditions for employees through training programs as required by State and Federal Agencies. Adheres to aquatic safety standards.
- Perform recruiting services for all aquatic part-time and seasonal employees; conduct employee orientation sessions as needed. Prepare payroll for assigned programs.
- Create and distribute program flyers for aquatic programs

The Town of Weston is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, the Town will provide reasonable accommodations to qualified individuals with disabilities and encourage both prospective and current employees to discuss potential accommodations with the Town when necessary.

- Provides reports about the Aquatic Programs to the Parks and Recreation Commission.
- Supervises, trains, assigns work, counsels and evaluates employees; personnel functions are conducted with the approval and direction of the Parks and Recreation Director.
- Prepare and administer operating budget for aquatics division for Parks and Recreation Director.

Minimum Qualifications:Education, Training and Experience:

The qualifications required would generally be acquired with an Associates' Degree in Recreation or some closely related field and 3 years of responsible recreation or aquatics experience, including supervisory experience; or any equivalent combination of education, work experience and training

Special Requirements:

Must have and maintain; Valid CT Driver's License; CPR/First Aid/AED Certified. Must be able to obtain within 6 months of hire date; Certified Lifeguard and Trainer; Certified Water Safety Instructor and Trainer; Certified Pool Operator Certificate.

How To Apply: Those who wish to apply for this position must email a cover letter, application and resume to spaez@westonct.gov.



APPLICATION FOR EMPLOYMENT

The Town of Weston is an Affirmative Action/Equal Opportunity Employer

The Town of Weston ("Town") considers applicants for all positions without regard to race, color, religion, age, creed, sex, marital status, pregnancy, sexual orientation, citizenship status, the presence of non-job-related medical conditions or disabilities, veteran status, or any other legally protected class.

Instructions: Please complete this application form in its entirety, including specific dates where requested. Failure to provide all required information may result in your application being disapproved. A resume may be attached but is not a substitute for completing the application form in its entirety. Please print or type your responses.

Date of Application:

Position:

PERSONAL INFORMATION

Last Name	First Name	Middle Name or Initial		
Address Number	Street	City	State	Zip Code
Home Phone #:		Cell Phone #:		
Email Address:				
Best time of day to contact you:				

AVAILABILITY

Check all that apply:

Schedule: Full-Time Part-Time - please circle: Mornings Afternoons Evenings

Seasonal - Indicate dates available: from ___ / ___ / ___ to ___ / ___ / ___

Other (explain) _____

Workdays: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

TOWN OF WESTON EMPLOYMENT HISTORY

Are you currently employed by the Town? Yes No If yes, state current position and Department:

Have you previously worked for the Town? Yes No If yes, state the following:

- Dates of prior Town employment:

- Position held at time of employment separation:

- Reason(s) for separation from Town employment:

EDUCATION HISTORY

Education Level Completed:

- Less than high school High school or equivalent (GED) Technical School
 Some College 2-year College 4-year College Graduate School

High School Information:

High School (name):

City/State:

College Information (list all schools attended):

College attended (name):

City/State:

Major(s):

Degree(s) earned:

Graduate School Information (list all schools attended):

College attended (name):

City/State:

Course of Study:

Degree(s) earned:

Other School/Training (list all schools/programs attended):

School/Program attended (name):

City/State:

Course of Study:

Degree(s)/Certificate(s) earned:

(Attach additional sheets if you attended more schools or received additional degrees or certificates)

EMPLOYMENT HISTORY

Instructions: List all employment positions held by you over the last fifteen years. Begin with your current/most recent position. List all positions separately, even if with the same employer. For each position listed, provide all information requested. If you need additional space to complete your response then attach additional sheets.

1. Employer (Name/City/State):

Employer Phone #:

Position/Job Title:

Start Date: End Date:

Full-Time Part-Time Per diem Number of hours worked per week: _____

Name & Job Title of Immediate Supervisor:

If still employed, may the Town contact your present employer? Yes No

Please list all major duties and responsibilities performed by you in this job:

Reason for Leaving:

2. Employer (Name/City/State):

Employer Phone #:

Position/Job Title:

Start Date: End Date:

Full-Time Part-Time Per diem Number of hours worked per week: _____

Name & Job Title of Immediate Supervisor:

If still employed, may the Town contact your present employer? Yes No

Please list all major duties and responsibilities performed by you in this job:

Reason for Leaving:

3. Employer (Name/City/State):

Employer Phone #:

Position/Job Title:

Start Date:

End Date:

Full-Time Part-Time Per diem Number of hours worked per week: _____

Name & Job Title of Immediate Supervisor:

If still employed, may the Town contact your present employer? Yes No

Please list all major duties and responsibilities performed by you in this job:

Reason for Leaving:

4. Employer (Name/City/State):

Employer Phone #:

Position/Job Title:

Start Date:

End Date:

Full-Time Part-Time Per diem Number of hours worked per week: _____

Name & Job Title of Immediate Supervisor:

If still employed, may the Town contact your present employer? Yes No

Please list all major duties and responsibilities performed by you in this job:

Reason for Leaving:

5. Employer (Name/City/State):

Employer Phone #:

Position/Job Title:

Start Date:

End Date:

Full-Time Part-Time Per diem Number of hours worked per week: _____

Name & Job Title of Immediate Supervisor:

If still employed, may the Town contact your present employer? Yes No

Please list all major duties and responsibilities performed by you in this job:

Reason for Leaving:

6. Employer (Name/City/State):

Employer Phone #:

Position/Job Title:

Start Date:

End Date:

Full-Time Part-Time Per diem Number of hours worked per week: _____

Name & Job Title of Immediate Supervisor:

If still employed, may the Town contact your present employer? Yes No

Please list all major duties and responsibilities performed by you in this job:

Reason for Leaving:

SPECIALIZED SKILLS

Instructions: Check skills/equipment that you are able to operate. Attach additional sheets if necessary.

PC/Mac Typewriter Word Processing (*e.g.*, Microsoft Word)

Spreadsheet (*e.g.*, Microsoft Excel) Other: _____

List any machinery or equipment that you are able to operate:

List additional information about your skills that may be helpful to the Town in considering your application:

REQUIRED LICENSES, CERTIFICATIONS, OR OTHER QUALIFICATIONS

Do you currently have a valid Motor Vehicle Driver’s License? Yes No State: _____

Do you currently have a valid Commercial Driver’s License (CDL)? Yes No

If you answered “Yes” to the previous question, check all that apply:

Class A Class B Class C CDL License #: _____

Do you have any valid licenses or certificates which authorize you to practice a profession or trade?
(*e.g.*, law, nursing, psychology, plumbing, etc.) Yes No

List all professional licenses/certifications currently held:
(Use additional sheets if you require additional space to complete your response.)

Type of License/Certification: _____	License/Cert. #: _____
Issued By: _____	Date Issued: _____ Expiration Date: _____

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Issued By: _____	Date Issued: _____ Expiration Date: _____

Type of License/Certification: _____	License/Cert. #: _____
Issued By: _____	Date Issued: _____ Expiration Date: _____

REFERENCES

Identify three **professional** references the Town may contact in connection with your employment application.

Name: _____	Title: _____
Business/Co. Name: _____	Telephone: _____
Address: _____	
Street	City State
Relationship to you (e.g., co-worker, supervisor, etc.): _____	
How many years? _____	
Are they still employed with the company/business? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Name: _____	Title: _____
Business/Co. Name: _____	Telephone: _____
Address: _____	
Street	City State
Relationship to you (e.g., co-worker, supervisor, etc.): _____	
How many years? _____	
Are they still employed with the company/business? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Name: _____ Title: _____

Business/Co. Name: _____ Telephone: _____

Address: _____
Street City State

Relationship to you (e.g., co-worker, supervisor, etc.): _____

How many years? _____

Are they still employed with the company/business? Yes No

TERMS AND AGREEMENTS

By signing my name on the signature line below, I am certifying:

- That the statements made by me on this application form and attachments, if any, are true and complete to the best of my knowledge, are made in good faith, and are subject to verification as a condition of employment. I understand that intentional falsification of my application materials may result in disqualification of my candidacy or termination of employment;
- That I understand and acknowledge that if offered employment with the Town of Weston, my employment may be subject to and conditioned on my taking and passing a pre-employment physical examination, pre-employment drug screening test and/or a pre-employment background check (e.g., criminal history, education verification, driving history, credit history) (requirements may vary depending on the position);
- That, if I am under the age of 18, I understand and acknowledge that if offered employment with the Town of Weston, my employment is subject to and conditioned on my providing such work permits, or other proof of eligibility to work that is or may be required by law;
- That I understand and acknowledge that, in compliance with federal law, all persons hired for employment with the Town of Weston will be required to verify identity and eligibility to work in the United States and to complete required employment eligibility verification forms upon hire.

I agree to these terms.

I do not agree to these terms.

Signature

Date