

**Town of Chilmark Beach Department
Superintendent Martina Mastromonaco
POB 119**

Chilmark MA 02535

Email-martinaonmv@yahoo.com

Town Hall Phone 508-645-2100 Fax 508-645-2110 Home 508-693-6008

PRINT CLEARLY FILL IN ALL INFO

2023APPLICATION

Name: _____
Mailing Address: _____
City: _____ Zip Code: _____
Phone Number: _____
Cell Phone: _____
Email Address: _____
Do you have summer housing _____ YES _____ NO _____
Position: Lifeguard Gate Guard Sticker Clerk Parking Maintenance
(Circle any of the above positions that you wish to apply for; you may apply for more than one position depending on your availability and experience)
Dates you will be available to work, please be specific (example July 1st-Sep 2nd)
Arrive on the island date if applicable/possible 14-day quarantine
Arrival _____ Start _____ End _____
Reason _____

Age _____ DOB: _____ Uniform Size SM. MED. LG XLG

Present Occupation/Student _____

Training: If you email back your application, you **MUST** also send a copy of the signed application with **ALL your Cards** to be considered for employment. Letters from the Course instructor as confirmation of enrollment in class will be accepted temporarily until completion of course.

CPR & AED Including Infant, Child and Adult	Date of expiration _____
Sponsored by _____	
Lifeguard Training	Date of Expiration _____
Sponsored by _____	
First Aid/ First Responder Training	Date of Expiration _____
Sponsored by _____	
Ocean Rescue/Waterfront Module (LVB)	Date of Exp _____

Full Time Positions: Menemsha/Squibnocket lifeguard interested? _____

Have you ever worked for the Town of Chilmark? Yes NO

If yes provide dates and department. (Assure you're your employee evaluation is signed and on file with the town.

Special Skills/Training

Previous Applicable Experience

References (at least one reference must be an Island resident) this applies to all applicants

Name _____	Phone _____
Name _____	Phone _____
Name _____	Phone _____

Emergency Contact: Name _____
Relationship: _____ **Phone #** _____

ALL NEW APPLICANTS MUST BE AVAILABLE TO COME TO THE ISLAND FOR INTERVIEW.

PREVIOUS YEARS EMPLOYEES MUST FILL OUT NEW APPLICATION TO REAPPLY YEARLY AND PROVIDE COPIES OF CARDS.

**APPLICATION CAN BE EMAILED BACK TO Martina Mastromonaco
martinaonmv@yahoo.com**

PLEASE SIGN and MAIL the Original

I hereby declare that the statements and answers made as part of this application are true and made under penalties of perjury.

If hired by the Chilmark Beach Department I hereby consent to their random drug testing policy. I do so in that recognition of the fact that the lives and safety of persons using Town beaches depends upon my ability to perform my duties and that such ability would be impaired by my use of illegal drugs. I further understand that should I fail a random, or “for cause” drug test, my employment will be subject to termination after a hearing with the beach committee.

If I take prescription or over the counter medication that such my ability would be impaired by the use of the medication, I will cover my shift and notify my supervisor.

1. Rate of Compensation \$14.12 to \$23.35 subject to change
2. Seasonal Employees do not receive over time. All positions are seasonal and are exempt from unemployment.
3. You will be provided two uniform T-shirt and a sweat top. You MUST provide a suitable Red swim guard trunk/suits and Red shorts. You provide a mask.
4. Please include with your application: a) a note to the beach committee telling why we should hire you for the season, b) a written recommendation, and c) copies of ALL required certification. This applies even if you have work in past seasons.
5. Please read all covid guidelines for employment for the town, expect a 14-day quarantine prior to working.

Signature _____ **Date** _____

