

OCEAN CITY BEACH PATROL

END OF SEASON and EXTENDED EMPLOYMENT AGREEMENT



| NAME | CREW |
|------|------|
|------|------|

| PLEASE PROVIDE THE FOLLOWING INFORMATION | |
|---|------------|
| ☐ I AM WILLING TO WORK FULL-TIME (except for regularly scheduled days off) UNTIL THE FINAL DAY OF BEACH PATROL FOR THE 2021 SEASON (Sunday, October 3, 2021). | |
| I am requesting permission to be considered to continue my employment with the Ocean City Beach Patrol past Monday, September 6, 2021 (Labor Day) and understand to my evaluations and employment record will be used to determine if I will be granted permission to continue employment. If selected I will work on the days that I have indicated below. I understand that this is for the remainder of the summer of 2021 season. I am aware that this is an extension of my current position with the Ocean City Beach Patrol and therefore will be compensated at my current rate. Additionally, I appreciate that the Beach Patrol takes into account where I would like to be placed whee work, but understand that I will be placed where needed which may include being moved during the course of a day. Furthermore, I realize that it is my responsibility to provide a schedule indicating my availability for work and have done so by circling the dates below. I also understand that should I need to change the schedule that I have provided, I must complete a "Special Request Day Off" form and forward it to Lt. Stone at least two full weeks prior to the requested days off. | en I ve |
| (Please ✓ one box) I will be working Sunday, October 3, 2021 (Please ✓ one box) I am interested in working after October 3, 2021 (Please ✓ one box) I am interested in working Full-time until All work is complete | uai |
| I WILL WORK FULL-TIME (except for regularly scheduled days off) UNTIL MY FINAL DAY OF BEACH PATROL FO THE 2021 SEASON WHICH IS,,,, | R |
| I have provided official documentation of my last day of full-time employment. YES NO WAS THIS DATE INDICATED ON THE CONTRACT YOU SIGNED WITH THE BEACH PATROL? YES NO IF NOT, PLEASE EXPLATING date should not vary from the date you indicated when you completed your employment agreement. If it does it may affect your eligibility for employment or promotions in the future (Full Documentation Required) YOU SHOULD BE GIVING THE BEACH PATROL EVERY POSSIBLE DATE. | |
| DATE and TIME WHEN TURNING IN EQUIPMENT / /2021 : DATE WHEN LEAVING OCEAN CITY / /202 NOTE: Return of all issued equipment and fulfilling any financial obligation (by Nov 1st) is a requirement for all employees prior to re-hire for the following season. IS YOUR EXITING RELATED TO SCHOOL? | :1 |
| WILL YOU BE RETURNING FOR OCBP WORK ANYTIME BEFORE October 3, 2021? (Please ✓ one box) ☐ YES - PLEASE LEAVE ME ON THE PAYROLL (Indicate dates available in box below) ☐ NO - PLEASE REMOVE ME FROM THE PAYROLL (I am choosing not to work anymore this season) | |
| WORKING LABOR DAY WEEKEND? ☐ YES ☐ NO Please ✓ ALL DAYS ☐ FRIDAY ☐ SATURDAY ☐ SUNDAY ☐ MONDAY | |
| DO YOUR CURRENT PLANS INCLUDE RETURNING TO THE BEACH PATROL FOR THE SUMMER OF 2022? TES NO THIS INFORMATION IS CRITICAL FOR RECRUITING, TESTING and HIRING FOR NEXT SEASON! (BREAKING YOUR CONTRACT MAY JEOPARDIZE THOSE PLANS) | |
| ☐ I WILL BE AVAILABLE TO WORK ON THE FOLLOWING DATES AFTER I COMPLETE MY FULL-TIME COMMITMENT, UNTIL THE FINAL DAY OF BEACH PATROL FOR THE SEASON (Sunday, October 3, 2021). | |
| CIRCLE ALL DAYS THAT YOU WILL BE AVAILABLE TO WORK (YOU SHOULD WORK EVERY POSSIBLE DAY!) | |
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| I understand that the above represents a written agreement between me and the Ocean City Beach Patrol. My failure to fulfill any conditions of the above agreement may result in jeopardizing any future employment with the Town of Ocean City or the Ocean City Beach Patrol. | of |

Signature of Beach Patrol Employee

CREW CHIEF _____ DATE__/_/2021 SERGEANT _____ DATE__/_/2021 LIEUTENANT _____ DATE__/_/2021

LAST DAY OF WORK AS INDICATED ON CONTRACT _____ /___/2021 DOCUMENTATION OF FINAL DAY PROVIDED YES NO