**Date Due: 3/01/24** or until positions are filled

## DEEP RIVER PARKS AND RECREATION 2024 SUMMER CAMP EMPLOYMENT

Summer Youth Cam	p:	ely for only one position po		_	nior Coun	re	equirem		he Tow	criptions & job n's web site.
NAME				EMA	AIL:					
ADDRESS			TOWN	OWN			STATE ZIP			
CELL PHONE				ALT	PHONE					
AGE (if minor):		GRADE (FALL 2024):			SCHOO	DL:				
EDUCATION:		Name & Address	Course of S			fudy		Year Compl		Diploma/Degree
Secondary School										
College										
Other (Specify)										
WORK/CAMP HIST	ORY (in	nclude volunteer experien	nce):							
Employer		Position Title		Job Descri			scription	iption		Dates
Special Training and C	Certificati	ons held: (include copies o	of current	first a	id, CPR a	nd life	guard ce	ertificatio	ens)	
Do you have any know	vn allergi	es? YESNO	D	o you	carry an e	epi-pe	n? YES_	N	Ю	
If yes, to what are you	allergic?									
Interests and Hobbies:										
Why do you feel quali	fied for th	nis position?								

For Counselor & CIT positions- Summer Camp runs tentatively from Monday, June 17th through Friday, August 09th 2024, M-F.

No camp on Thursday, July 4th.

Counselor and CIT's positions are full day. Please see job descriptions for more information and for minimum availability requirements. Counselor positions require current CRP and first aid certifications.

Times Not available:							
Date	Da	ıys	Time	Reason (i.e. vacation, other job, doc. appt. etc.)			
Additional information regarding availability							
<b>REFERENCES:</b> List two people	e (excluding relati	ves) who car	n attest to your char	racter and work ethic.			
NAME		<i>F</i>	ADDRESS	PHONE			
	EN CED CED	ICT CONTR	A CE PEDGON AN	AD DATOME WAS REED.			
	<u>EMERGEN</u>	ICY CONTA	ACT PERSON AN	ND PHONE NUMBER:			
NAME/RELATIONSHIP:							
PHONE-HM:	W	K:		CELL:			
				lete, and I understand that if any false information,			
				f I am employed, my employment may be terminated at b River's rules and policies. I further agree that my			
employment and compensation can	be terminated, with	th or without	cause, and with or v	without notice, at any time at either my or the Town's			
				by be changed, with or without cause, and with or without irector serving as the Town representative, as well as its			
First Selectman, and then only whe	en in writing and si	gned by the e	ither, has the author	ity to enter into any agreement for employment for any			
specific period, or to make any agree Employment.	eement contrary to	the foregoing	". The Town of Dec	ep River is dedicated to Diversity and Equal Opportunity			
Signature		Date					
Email Address			Cell N	No			
Office Use Only: Date Received:							
Certifications Received: CPR	FIRST AID	AED	LIFEGUARD	EPI-PENMEDICAL ADMINISTRATION			
OTHER							