

DEEP RIVER PARKS AND RECREATION 2020 SUMMER CAMP EMPLOYMENT

Date Due: 3/15/20
or until positions are filled

POSITION DESIRED: *Apply for only one position per application.*

Please see complete job descriptions & job requirements on the Town's web site.

Summer Youth Camp:

☐ Youth Volunteer (Counselor-in-Training (CIT)) ☐ Junior Counselor ☐ Senior Counselor

NAME		EMAIL:		
ADDRESS		TOWN	STATE	ZIP
CELL PHONE		ALT PHONE		
AGE (if minor):	GRADE (FALL 2020):	SCHOOL:		
<u>EDUCATION:</u>	Name & Address	Course of Study	Years Completed	Diploma/Degree
Secondary School				
College				
Other (Specify)				

WORK/CAMP HISTORY (include volunteer experience):

Employer	Position Title	Job Description	Dates

Special Training and Certifications held: *(include copies of current first aid, CPR and lifeguard certifications)*

Do you have any known allergies? YES _____ NO _____ Do you carry an epi-pen? YES _____ NO _____

If yes, to what are you allergic? _____

Interests and Hobbies: _____

Why do you feel qualified for this position? _____

For Counselor & CIT positions- Summer Camp runs tentatively from Monday, June 22nd through Friday, August 14th 2020, M-F. No camp on Friday, July 3rd.

CIT positions are offered as either half day or full day with preference given for full day availability.

Counselor's positions are ONLY full day.

Please see job descriptions for minimum availability requirements.

Are you available to work: ☐ Full Time ☐ Part Time ☐ *Half Day/AM ☐ *Half Day/PM ☐ Full Day

*for CIT's only

Times Not available:

Date	Days	Time	Reason (i.e. vacation, other job, doc. appt. etc.)
Additional information regarding availability			

REFERENCES: List two people (excluding relatives) who can attest to your character and work ethic.

NAME	ADDRESS	PHONE

EMERGENCY CONTACT PERSON AND PHONE NUMBER:

NAME/RELATIONSHIP: _____

PHONE-HM: _____ WK: _____ CELL: _____

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to conform to the Town of Deep River's rules and policies. I further agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time at either my or the Town's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the Town. I understand that Deep River Parks & Recreation's Director serving as the Town representative, as well as it's First Selectman, and then only when in writing and signed by the either, has the authority to enter into any agreement for employment for any specific period, or to make any agreement contrary to the foregoing". The Town of Deep River is dedicated to Diversity and Equal Opportunity Employment.

Signature _____ Date _____

Email Address _____ Cell No. _____

Office Use Only: Date Received: _____ Certifications Received: CPR FIRST AID AED LIFEGUARD EPI-PEN
MEDICAL ADMINISTRATION OTHER _____