DEEP RIVER PARKS AND RECREATION 2020 SEASONAL CAMP EMPLOYMENT

Date Due: 2/19/20

POSITIO		Please see complete job descriptions & job requirements on the Town's web site.										
	Director:		Assistant Di	sistant Director			uiremei	nts on tr	ne Iow	n's web si	:e.	
NAME				EMAIL:								
ADDRESS			TOWN			S	TATE		ZIP			
NODRESS												
CELL PHO	NE		ALT PHON									
EDVICATION N. O. A.I.I				Course of Study				Year	rs	Dinlama/Dagmas		
EDUCATION:		Name & Address		Course of S		Study		Completed		Diploma/Degree		
Secondary	School											
C-II.												
Colle	ege											
Other (S ₁	pecify)											
WORK/C/	AMP HISTO	ORY (include volunteer expe	prionco): A	re You Prese	ntly	, Employ	ved?		Yes		No	
								f amploy				
List employers,(current position first), addresses, phone Employer Address & Phone				Position Title					Dates			
Employer		ridaress & Filone	1 osition	Title		Job Descrip		cription	1011		Dates	
Special Tra	ining and Ce	ertifications held: (include exp	piration dates o	and copies of	^{c}AL	L curren	ıt certif	fications	require	ed for this	position)	
Certification Type			Dat	Date Earned/Date Ex			xpires Curre			ent Y/N		
						1	$\overline{}$					
Have you ever been convicted of or pleaded guilty or no contest to a crime? Yes No												
If so, explain	in (include d	ate and state):										

Do you hold a current Driver's License? Yes No If yes, from what state?											
REFERENCES: List three (3) people	(excluding relatives) who can att	est to your character ar	d work ethic.								
NAME	ADDRES	SS	PHONE								
Please explain why you feel you are qu	nalified for this position:										
List any experiences you have had deal	ling with youth:										
Interests and Hobbies:											
Other information you would like cons	idered regarding this application?	<u> </u>									
"I certify that all the information submittomissions, or misrepresentations are disc any time. In consideration of my employ employment and compensation can be ten option. I also understand and agree that the notice, at any time by the Town. I understand First Selectman, and then only when in we	ed by me on this application is true overed, my application may be reje- rment, I agree to conform to the To rminated, with or without cause, an attempt and conditions of my empl stand that Deep River Parks & Reco- triting and signed by the either, has at contrary to the foregoing". I author	and complete, and I undected and if I am employ wn of Deep River's rule and with or without notice oyment may be changed reation's Director serving the authority to enter in orize Deep River Parks a	ed, my employment may be terminated at s and policies. I further agree that my , at any time at either my or the Town's , with or without cause, and with or without g as the Town representative, as well as it's to any agreement for employment for any nd Recreation to investigate all information								
Signature		Date									
Email Address		Cell No									
Office Use Only: Date Received:	Certifications Received: CF	PR FIRST AID A	ED LIFEGUARD EPI-PEN								

MEDICAL ADMINISTRATION OTHER_