

# STAMFORD RECREATION SERVICES

## 2018 SUMMER CAMP EMPLOYMENT APPLICATION

### Please Read Before Completing This Application

All completed applications will be reviewed by our staff and will be determined if the candidate has the background / experience that we are looking for to be interviewed for a summer camp position. Due to the large amounts of applications that we receive each year, notification will not be sent out to candidates that do not receive an interview. Candidates that are selected to be interviewed will be contacted by phone and/or email to set up an interview.

### PERSONAL INFORMATION

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ MALE: \_\_\_ FEMALE: \_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ BEST TIME TO CONTACT: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_ TOWN: \_\_\_\_\_ STATE: \_\_\_ ZIP: \_\_\_

CURRENT AGE: \_\_\_\_\_

IF HIRED, DO YOU HAVE RELIABLE TRANSPORTATION TO WORK? YES: \_\_\_ NO: \_\_\_

HAVE YOU EVER APPLIED AT STAMFORD RECREATION BEFORE? YES: \_\_\_ NO: \_\_\_

YOU ARE ABLE TO WORK THE FULL SEVEN WEEKS OF CAMP? YES: \_\_\_ NO: \_\_\_

DO YOU HAVE ANY SUMMER VACATION PLANS? YES: \_\_\_ NO: \_\_\_

IF YES WHEN: \_\_\_\_\_

ARE YOU A HIGH SCHOOL STUDENT? YES: \_\_\_ NO: \_\_\_

ARE YOU A COLLEGE STUDENT? YES: \_\_\_ NO: \_\_\_

ARE YOU ENROLLED IN ANY SUMMER COURSE? YES: \_\_\_ NO: \_\_\_

IF YES WHEN WILL THEY BE HELD? \_\_\_\_\_

### HOW WHERE YOU REFERRED TO STAMFORD RECREATION SERVICES?

\_\_\_ WEBSITE

\_\_\_ NEWSPAPER

\_\_\_ FRIEND

\_\_\_ WALK-IN

\_\_\_ OTHER, EXPLAIN: \_\_\_\_\_

### POSITION YOU ARE APPLYING FOR THIS SUMMER?

\_\_\_ CAMP DIRECTOR    \_\_\_ ASSISTANT CAMP DIRECTOR    \_\_\_ ART INSTRUCTOR

\_\_\_ SPORTS INSTRUCTOR    \_\_\_ CAMP COUNSELOR

DO YOU HAVE ANY PREVIOUS CAMP EXPERIENCE? YES: \_\_\_ NO: \_\_\_

IF YES EXPLAIN: \_\_\_\_\_

**EDUCATION INFORMATION**

NAME OF HIGH SCHOOL: \_\_\_\_\_ GRADUATION YEAR: \_\_\_\_\_

ARE YOU ENROLLED IN COLLEGE AT THIS TIME? YES:\_\_\_ NO:\_\_\_\_\_

IF YES WHAT COLLEGE : \_\_\_\_\_ CURRENT YEAR: \_\_\_\_\_ MAJOR: \_\_\_\_\_

HIGHEST DEGREE EARNED: HIGH SCHOOL:\_\_\_ ASSOCIATES:\_\_\_ BACHELOR:\_\_\_

MASTERS:\_\_\_ SIX YEAR DEGREE:\_\_\_\_\_

**OTHER PERTINENT INFORMATION**

ARE YOU WILLING TO BE WITHOUT YOUR CELL PHONE AT WORK? YES:\_\_\_ NO:\_\_\_

DO YOU ENJOY SPORTS? YES:\_\_\_ NO:\_\_\_

IF YES, THEN WHAT SPORTS AND WHERE DO YOU PLAY?

\_\_\_\_\_  
\_\_\_\_\_

DO YOU ENJOY ARTS & CRAFTS? YES:\_\_\_ NO:\_\_\_

DO YOU ENJOY OUTSIDE ACTIVITIES? YES:\_\_\_ NO:\_\_\_

DO YOU ENJOY INSIDE ACTIVITIES? YES:\_\_\_ NO:\_\_\_

DO YOU LIKE TO SWIM? YES:\_\_\_ NO:\_\_\_

LIST OTHER HOBBIES OR EXTRACURRICULAR ACTIVITIES THAT YOU ENJOY AND WHY?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OUT OF THE FOLLOWING CIRCLE TOP THREE CHOICES.**

- |          |            |          |       |               |         |
|----------|------------|----------|-------|---------------|---------|
| SOCCER   | BASKETBALL | BASEBALL | DANCE | ARTS & CRAFTS | DRAMA   |
| GOLF     | AEROBICS   | GYM      | MUSIC | TENNIS        | NATURE  |
| SWIMMING | RUNNING    | READING  | LIFE  | YOGA          | FRIENDS |

HAVE YOU EVER WORKED WITH CHILDREN BEFORE? YES:\_\_\_ NO:\_\_\_

IF YES EXPLAIN: \_\_\_\_\_

ARE YOU WILLING TO LEARN AND FOLLOW ALL CAMP & CITY RULES & REGULATIONS?

YES:\_\_\_ NO:\_\_\_

WILL YOU WEAR UNIFORM ATTIRE TO WORK EACH DAY IF HIRED? YES:\_\_\_ NO:\_\_\_

DO YOU HAVE ANY EXPERIENCE WORKING AROUND CHILDREN? YES:\_\_\_ NO:\_\_\_

LIST ANY EXPERIENCE WITH CHILDREN THAT YOU MAY HAVE BELOW.

\_\_\_\_\_  
\_\_\_\_\_

WHAT IS YOUR MAIN REASON FOR APPLYING FOR THIS JOB?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PREVIOUS EMPLOYMENT INFORMATION—PLEASE LIST MOST RECENT FIRST.**

COMPANY NAME: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ DATES OF EMPLOYMENT: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

SUPERVISORS NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ DATES OF EMPLOYMENT: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

SUPERVISORS NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ DATES OF EMPLOYMENT: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

SUPERVISORS NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

**REFERENCE INFORMATION**

NAME	ADDRESS	PHONE NUMBER	RELATIONS

**MY SIGNATURE BELOW CERTIFIES THAT I HAVE READ AND UNDERSTAND THE INFORMATION ON THIS APPLICATION AND THAT ALL OF MY INFORMATION IS TRUE AS WELL AS CORRECT. I UNDERSTAND THAT NOT ALL APPLICANTS WILL BE CONTACTED FOR AN INTERVIEW.**

APPLICANTS NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_