

EMPLOYMENT APPLICATION
for SUMMER YOUTH COUNSELOR
TOWN OF NEW BALTIMORE SUMMER PARKS PROGRAM



Please type or print NEATLY

Name: _____ Phone _____

Address: _____
_____ Date of Birth _____

E-Mail Address: _____

Emergency Contact: (Name) _____ (relationship to you) _____

Telephone number(s) _____

ARE YOU CURRENTLY EMPLOYED? Yes No IF YES, WHERE? _____

MAY WE CONTACT YOUR EMPLOYER? Yes No TEL.#/CONTACT PERSON: _____

HAVE YOU APPLIED FOR A POSITION WITH THE PARKS PROGRAM BEFORE? Yes No

IF YES, WHEN? _____ FOR WHAT POSITION? _____

EDUCATIONAL STATUS: (check and circle current status)

- | | | | | |
|----------------------------|-------|------|--------|--------|
| _____ High School Student | Fresh | Soph | Junior | Senior |
| _____ High School Graduate | | | | |
| _____ College/University | Fresh | Soph | Junior | Senior |
| _____ College Graduate | | | | |

What school/college/university do you attend? _____ Major/Area of Study: _____

REFERENCES: List below two persons who have knowledge of your work performance/personal character.

Name - First, Last _____ Name - First, Last _____

Telephone Number _____ Telephone Number _____

City, state, zip _____ City, state, zip _____

Occupation _____ Occupation _____

of Years Acquainted/relationship: _____ # of Years Acquainted/relationship to you: _____

Please complete the reverse side of this application, then sign and date below:

Signature: _____ **Date:** _____

EXPERIENCE AND QUALIFICATIONS: *Attach additional pages if necessary*

Why are you interested in becoming a camp counselor? _____

Describe any experience that you have working with children: _____

What specific qualities or skills do you possess that would make you a positive addition to our staff? _____

Use this space for any additional comments/information you would like to provide: _____
