

Part-Time Seasonal Employment Application

(Applicants must be 14 years of age or older to be eligible for employment

 $(\sqrt{\ })$ CHECK ALL POSITIONS YOU ARE APPLYING FOR

Camp Activity Area Director - 18 years or older

4 years or older
ndorsement (Copy of Driver License Required)
Coaching Certification and/or IABBO Certification

Date of Application_

	Drama Program Sports									
	Arts & Crafts									
	Camp Activity Area Assistant - Grade 10 or older									
	Camp Bedminster Group Counselor - Grade 10 or older									
	Camp Bedminster Group Counselor in Training (CIT) - 14 years or older									
	Bus Driver - 18 years or older with valid CDL with passenger endorsement (Copy of Driver License Required)									
	Scoreboard Operator - 14 years or older									
	Referee/Official - 14 years or older with Rutgers S.A.F.E.T.Y. Coaching Certification and/or IABBO Certification									
	Other									
APPLICAN	T INFORMATION									
Name										
Street Address				Town/Zip						
Home Telepho	ne#	Cell Telephone#		E-Mail Address						
Social Security	Number			Date of Birth						
Grade		Age		Have you even been convicted of a crime or misdemeanor? $\hfill Yes \hfill \hf$						
If yes, please explain (use a separate sheet if necessary):										
EDUCATIO	N INFORMATION									
Elementary School		Grade/Graduated	High Schoo	Grade/Graduated						
College			Major	Year/Graduated						
Other										
List special credentials (i.e., certifications, first aid, special courses relating to position, etc.)										
What college recreation courses have you completed?										
List activities you are able to teach (use a separate sheet if necessary):										

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(Continued)

EMPLOYMENT HISTORY (List all jobs especially recreation related work, camps, etc.)								
-	act your employer(s)? \Box	Yes 🗆 N	lo					
Dates Employed	Position	1	Employer Name & Tel	ephone	Salary	Reason for Leaving		
Linployed								
REFERENC	ES (Please give the name of	two peopl	e, not related to yo	u, whom you hav	ve known for	at least one year)		
	Name		Telephone			Years Known		
EMERGENO	CY CONTACT INFORM	ATION						
Name			Telephone			Relationship		
Name			Telephone			Relationship		
WORK AVAILABILITY (On what dates are you available to work? Please be exact!)								
From To								
SIGNATUR	ES (If under 18, requires po	arent/legal	guardian signature					
						contained in this application for		
	employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or							
misleading information given in my application or interview (s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. I also understand and agree that my employment is for no definite period and may								
regardless of the date of payment of my wages or salary, be terminated at any time without any previous notice.								
I have made no plans that will conflict with my employment and agree to complete the season if appointed.								
Signature of A	Applicant				Date			
Parent/Guard	dian Signature		Date					

Mail, hand deliver or fax this application to:



Bedminster Township Recreation Department One Miller Lane Bedminster, NJ 07921 Tel: (908) 212-7014 Fax: (908) 212-7001

OFFICE USE ONLY						
Date Received	Interview Date	Comments				
	& Time					