

2023 Application for Employment with Parks and Recreation

Federal, state, and local laws and regulations prohibit discrimination on the basis of race, color, religion, national origin, ancestry, sex, disability, and age. Depending upon employment location, other employment prohibitions and restrictions may apply. The information on this application is not solicited for, nor will be used for, the purpose of unlawful discrimination. Newtown Township is an Equal Opportunity Employer.

PRINT LEGIBLY, IN BLACK OR BLUE INK ONLY

Name:					
	First	Middle	Last		
Position applied for:					

Please number your first and second preferred camp below. Dates are usually end of June to beginning of August. (Please note, preferences are not always granted as we must satisfy the needs of the camp first)

_____ Camp Beechtree: six weeks, half day, ages 4-6, at Wrightstown Elementary School

_____ Playground Camp: six weeks, half day, grades 1-4, at Goodnoe Elementary School

_____ Camp Newtown: six weeks, full day, grades 1-5, at Newtown Elementary School

Adventure Camp*: six weeks, full day, grades 6-8, at Newtown Middle School *must be at least 18 y/o, Adventure Camp staff may only work 4 day weeks depending on registrations

Mandatory training (paid) is expected to be Wednesday through Friday before camp begins. Details will follow upon hire.

Will you be participating in any activities that will restrict your availability (vacations, college visits, etc)? If yes, please describe:

Personal Data

Address:			
	Street		Apt. No/PO Box
	City	State	Zip
Phone (cell):		Alternate number:	
Email:		Shirt Size (co	tton, unisex)
Are you under	18 years of age?		
		ust include a workers perm	

Education Record

School	Name & Address	Years Attended	Graduation Date	Course/Major
High School				
College				
Post Graduate				
Business or Trade				

State the training, experience, education, or any other facts, which particularly qualify you for the job sought, including capabilities and licenses such as CPR/FA, etc.

Employment History

Describe your employment history, starting with your most recent employer. If this is your first job, please indicate here:

Dates From/to	Name of Employer	Position	Reason for Leaving	Supervisor	Number	Permission to contact?

If necessary, attach any additional information.

References

List three individuals who have known you at least two (2) years and whom we may

contact:

Name	Address	Phone Number

Applicant's Statement

I certify that the answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I am not under any restrictions by virtue of employment with a former employer which would limit my functions or performance.

This application shall be considered active for a period of time as determined by the employer.

I understand that neither this application nor any offer of employment from Newtown Township constitutes an agreement unless a specific document to that effect is executed by both parties in writing.

In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand that I am required to abide by all rules and regulations of Newtown Township.

Signature: _____

Date: _____