TOWN OF GARDINER **APPLICATION for SUMMER RECREATION EMPLOYMENT**
Gardiner, NY 12525

* Please note: Counselors must be at least 16 years old by the first day of camp.
* Counselor-In-Training positions are available for 14-15-16 year olds, but CITs must complete the CIT Application (not this form).

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Personal Information:

Last name: _____ *First name:* _____ *M.I.*___

Address: _____

Home Phone: _____ *Cell Phone:* _____

Date of Birth: _____ *e-mail:* _____

Driver's License #: _____ *Soc. Sec. #:* _____

T-shirt size (needed if hired): **S M L XL**

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Education Information:

High School: _____ *Graduation Date:* _____

College: _____ *Grad. Date:* _____ *Major:* _____

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Employment Information:

Place of Employment – Position *Supervisor* *Dates of Employment*

1. _____

2. _____

3. _____

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General Information:

Extra-Curricular & Community Activities, Hobbies, Experience in Arts & Crafts, Sports, etc.:

_____

_____

_____

Certifications Information *(not required for employment):*

List any valid certifications, including expiration dates (First Aid, CPR, Lifeguarding, etc.):

_____

_____

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Have you ever been arrested? *NO* _____ *YES* _____ *If yes, please explain below:*

_____

Do you have any physical or mental conditions that may affect your ability to work with children?

NO ____ *YES* _____ *If yes, please explain:* _____

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Reference Information

1. *Name*_____ *Phone #*_____

Address _____ *Years Known* _____

Relationship to you _____

2. *Name*_____ *Phone #*_____

Address _____ *Years Known* _____

Relationship to you _____

3. *Name*_____ *Phone #*_____

Address _____ *Years Known* _____

Relationship to you _____

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Other Comments: _____

I hereby certify that the information provided in this application is true and correct. I hereby grant permission for the Town of Gardiner to contact the above references, employers, and/or schools by telephone or in writing.

Signature of Applicant _____ *Date*_____