

Town of Berwick Recreation Department
11 Sullivan Street Berwick, Maine 03901
207-698-1101 ext. 117 ktaylor@berwickmaine.org

Application for Berwick Recreation Department

NOTE: Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status or the existence of a medical condition or handicap. Please type or print all information requested. An application not properly filled out may be rejected or returned for correction. A resume and or letters of reference may be included with the Application.

Date of Application: _____

Position(s) Applied for: (please circle) Counselor Leader Junior Volunteer Other
(Junior Volunteer is an unpaid position earning community service hours towards graduation. Applicants must be entering 9th grade in the fall to apply.) Junior Volunteer applicants due April 15, 2019

Counselor applicants : Which interview date(s) would you be available: March 22 ~ March 23 (circle one or both) If unavailable for either date, please contact Kim Taylor. **Counselor applications due March 18, 2019**

Name: _____
Last First Middle

Current Address: _____
Number Street PO BOX City/TownState Zip

Telephone Home: (_____) _____ Telephone Mobile: (_____) _____

License # _____ Any Traffic Violations? If yes, explain _____

Email Address: _____

If the above is a temporary address, please list your permanent address and telephone number:

Referral Source: Advertisement Friend Relative Agency Other

Have you filed an Application with the Town of Berwick before? Yes No If yes, give date(s) _____

If employed and if one is required, can you furnish a valid work permit? (required if under 16 years) Yes No

Are you employed now? Yes No May we contact your current employer? Yes No

Are you a citizen of the United States? Yes No

If Naturalized give date and place of Naturalization: _____

Are you prevented from lawfully becoming employed in the United States because of Visa or Immigration Status?

Yes No (Proof of citizenship or immigration status will be required upon employment.)

Are you available to work or volunteer: Fulltime Part-time Shift Temporary

On what date would you be available for work or volunteer? _____

Can you speak a foreign language? Yes No If yes, which one(s)? _____

Please list **ANY** violations of the law for which you have been convicted **OR** plead nolo contendere:

Name, Address and Telephone Number of person to be notified in case of an emergency: _____

Can you perform the essential and nonessential functions of the position for which you are applying without reasonable accommodation? Yes No If no, please describe accommodations or discuss it with Recreation Director. _____

Do you have any allergies to food, bees, latex etc... Yes No If yes, please specify and explain what precautions are necessary. _____

List any civic activities and civic offices held: _____

List three (3) references that are not related to you: (teachers, coaches, neighbors, other volunteer organizations)

Name	Address	Phone

EMPLOYMENT HISTORY

Please list previous employment in chronological order starting with the most recent. Please list contact including name and phone number or email.

- 1 _____
- 2 _____
- 3 _____

Community Service/Volunteer Activities

Please list and describe any experience you have had working with children. If applicable, please provide names and numbers of people that could give a reference to these activities. (babysitting, church groups, other organizations like PTO or other youth sports programs)

- 1 _____
- 2 _____
- 3 _____

Special Skills & Qualifications including CPR: _____ Babysitting Class _____

Please feel free to include letters of reference with your application.

Educational Background

What school do/did you attend? _____

Years Completed: _____

Specialized Training, Certificates, Apprenticeships, etc: _____

Honors/Awards Received: _____

ACTIVITY CHECKLIST: Please rate the following according to the rate system listed.

- (1) Activity in which you have experience and are capable of leading a group of children.
- (2) Activity in which you have participated and could assist in running.
- (3) Activity in which have an interest in, but you have had limited or no experience.
- (4) Activity that has no interest to you.

SPORTS

- ___ Tennis
- ___ Dodgeball
- ___ Basketball
- ___ Flag Football
- ___ Fishing
- ___ Volleyball
- ___ Soccer
- ___ Archery
- ___ Baseball
- ___ Softball
- ___ Swimming
- ___ Advanced Lifesaving
- ___ Water Safety Instructor
- ___ Track/Running

BOATING

- ___ Canoeing
- ___ Kayaking

GAMES

- ___ Problem Solving
- ___ Team Building
- ___ Board/Card Games
- ___ Carnival Games
- ___ Math Games

OUTDOOR SKILLS

- ___ Outdoor Cooking
- ___ Hiking
- ___ Climbing
- ___ Survival Skills

DRAMA/MUSIC

- ___ Skits/Plays
- ___ Song Leading
- ___ Musical Instrument
- ___ Storytelling
- ___ Dance

CRAFTS

- ___ Face Painting
- ___ Painting/Drawing
- ___ Photography
- ___ Jewelry Making

FIRST AID

- ___ CPR Cert. Date _____
- ___ First Aid Cert. Date _____
- ___ Water Safety/Advanced Lifesaving

NATURE

- ___ Plants
- ___ Gardening
- ___ Oceanography
- ___ Animals
- ___ Entomology

___ Other Ideas _____

Agreement

I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for employment consideration and, if I am hired, may be grounds for termination at a later date. I understand that any information that I give in this application or in the continuing application process may be subject to verification and investigation. I consent to the release of information about my ability, employment history, and fitness for employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel staff and other authorized municipal representatives of the Town of Berwick for employment purposes. The consent shall continue to be effective during my employment if I am hired. I understand that applications submitted for municipal employment may be public records. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are **true, correct, complete, and made in good faith.**

Signature of Applicant

Date

Signature of Parent or Guardian (sign if child is under 18)

Date

FOR PERSONNEL DEPARTMENT USE

Date of interview		
Remarks		
Date of Employment	Job title	Wage
Immigration Form Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Hiring Authority		Date