

Tarrytown/Sleepy Hollow Summer Camps Employment Application

Tarrytown Recreation Department
P.O. Box 292
Tarrytown, NY 10591

Personal Information - Please Print Clearly

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone#: _____

Email: _____

Age as of July 1st _____ Social Security # _____

Birth Date (optional if over age 18): _____ Gender (optional): Male _____ Female _____

Have you ever worked for the Village of Tarrytown before? Yes _____ No _____

Department: _____ Supervisor: _____ Position Held: _____

Have you ever been convicted of a felony or misdemeanor? Yes _____ No _____

If yes, please explain:

Do you speak a foreign language?

Language(s): _____ Proficiency: _____

What position are you applying for? (Please check one)

Director: _____ Counselor: _____ Lifeguard: _____ Medical: _____

Activity Coordinator (e.g. Arts & Crafts): _____ Other: _____

EDUCATION:

High School: _____ Grade Completed: _____

College: _____ Year Completed: _____

Degree (if any): _____

PREVIOUS EMPLOYMENT (List past two summers or years)

Employer: _____ Phone Number: _____

Nature of Work: _____ Dates Employed: _____

Employer: _____ Phone Number: _____

Nature of Work: _____ Dates Employed: _____

CAMP EXPERIENCE

Camp: _____

Location: _____

Director: _____

Contact Number: _____

Nature of Work: _____

Dates Employed: _____

Camp: _____

Location: _____

Director: _____

Contact Number: _____

Nature of Work: _____

Dates Employed: _____

Do you currently hold any American Red Cross instructor certificates? If so, please list expiration dates:

WSI: _____ CPR: _____ EMT: _____ First Aid Responder: _____

First Aid: _____ Certified Rescue Aide: _____ Life Guard: _____

Life Guard Instruction / Trainer: _____ Other: _____

Provide Two Character References (must not be family related):

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

The information provided in this application for employment is true, correct and complete. If employed, any misinformation or omission of fact on this application may result in my dismissal. I do hereby sign below that I have read and fully understand this statement.

Signature: _____

Date: _____