



Wells Parks & Recreation Summer Day Camp Application

Name _____
(Last) (First) (Middle)

Email _____

If under age 21 please list Date of Birth _____ SS# _____

Mailing Address _____
(Number) (Street) (City/Town)

Home Phone _____ Cell Phone _____

1. Have you ever been suspended from school? () Yes () No
If yes please describe the circumstances involved. _____

2. Are you now under any charges for any violation of law or are there any legal acts pending against you? () Yes () No If yes, what charges? _____

A yes answer to any of the above questions will not automatically prohibit you from employment. Date of offense, severity, and job relatedness will be considered.

3. Please list schools attended in chronological order beginning with High School or any special training.

| <u>Name of School</u> | <u>Years Attended</u> | <u>Degree Received</u> | <u>Yr Graduated</u> |
|-----------------------|-----------------------|------------------------|---------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

4. Employment History: Please list previous positions held in chronological order starting with the most recent.

| <u>Employer & Address & Phone</u> | <u>Position</u> | <u>Salary</u> | <u>Supervisor</u> |
|---|-----------------|---------------|-------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

If under 18 years of age can you provide proof of work eligibility? () Yes () No



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Please give four (4) personal references who have never been employers and who are not relatives of yours.

| | Name | Telephone |
|----|-------|-----------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |

Please list and describe any experience you have had working with children and the names and telephone numbers of people who could tell about these experiences (including babysitting, church groups, other counselor experiences; if noted above then you do not need to list them again.)

Please answer the following questions and if more space is needed, continue your answer on the back or attach additional sheets.

1. What goals would you like to accomplish as a day camp employee?

2. What hobbies do you enjoy during your spare time?

3. What activities would you like to see as part of the day camp program? How would you help to make them part of our day camp program?



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Activity Checklist (please number the following categories of which you can either lead, assist or have no experience in)

- (1) Activities in which you have experience and are capable of leading.
- (2) Activities which you have participated in and could assist in leading.
- (3) Activities which interest you that you have had no experience.

Sports

- ___ Tennis
- ___ Soccer
- ___ Basketball
- ___ Flag Football
- ___ Lacrosse
- ___ Volleyball
- ___ Archery
- ___ Baseball
- ___ Softball
- ___ Swimming
- ___ Advanced Lifesaving
- ___ WSI
- ___ Track/Running
- ___ Bicycling

Boating

- ___ Canoeing
- ___ Sailing
- ___ Rowing

Games

- ___ Group Games
- ___ Initiatives
- ___ New Games
- ___ Carnival Games

Outdoor Skills

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

Drama/ Music

- ___ Skits/Plays
- ___ Song Leading
- ___ Musical Instrument
- What kind _____
- ___ Storytelling
- ___ Dance

Crafts

- ___ Nature Crafts
- ___ Painting/Drawing
- ___ Photography
- ___ Other Ideas

First Aid

- ___ CPR (Cert. Date)
- ___ First Aid Course

Nature

- ___ Plants
- ___ Ecology
- ___ Entomology
- ___ Oceanography
- ___ Animals

Check off the position you are applying for as well as the age group that you are interested in working with.

Jr. Camp Counselor
(Age 16)

- ___ Gr. K-2
- ___ Gr. 3 & 4
- ___ Gr. 5 & 6

Camp Program Coordinator
(Age 21 & older)

- ___ Gr. K-2
- ___ Gr. 3 & 4
- ___ Gr. 5 & 6

Camp Counselor
(Age 16 & older)

- ___ Gr. K-2
- ___ Gr. 3 & 4
- ___ Gr. 5 & 6

Jr. Leadership Coordinator
(Age 21 and older)

- ___ Gr. 7-9



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***** You must be available for training the week prior to camp and full 8 week camp program.**

CERTIFICATION

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 Wells for employment purposes. This 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 _____ Date _____

Signature _____ Date _____
(Parent/Guardian must sign if under 18 yrs.)



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**Upon completion of this application please either deliver in person (best choice), mail, email, or fax it to the Recreation Office at the addresses noted below.

Wells Parks & Recreation
208 Sanford Road
Wells, Maine 04090
Telephone: 207-646-5826
Fax: 207-646-9033
Email: tbleblanc@wellstown.org

Please complete for an Employee Background Check.

Last Name: _____ First Name: _____

Address: _____

Phone # _____ Cellphone # _____

Driver License # _____ State Issued: _____

Social Security # _____ Date of Birth: _____

I, the undersigned applicant hereby expressly authorize the Town of Wells, its agents and employees to make any investigation of my personal or employment history, expressly including, but not limited to federal and/or state criminal, law enforcement, or traffic records. I further authorize any former employer, person, firm, corporation agency, administrative body or governmental agency to give the Town of Wells, its agents or employees any information they may have regarding me. In consideration of the review of my employment application by the Town of Wells, its agents or employees, I hereby release the Town of Wells and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information. I hereby state that all the information and materials I have provided to the Town of Wells as a part of the employment process are accurate and truthful.

I authorize all my present and previous employers, or references, to furnish information regarding my personal character, habits, or employment performance. I also authorize schools which I have attended to provide verification of educational attainment and other relevant information.

Signature: _____ Date: _____