

Town Of Bedford Recreation and Parks Department
425 Cherry Street
Bedford Hills, NY 10507
914-666-7004

Employment Application Instructions

1. Application must be completely filled out and signed **by applicant**.
(If applicant is under 18 a parent or guardian must review and sign application)
2. Lifeguard applicants must provide a photocopy (front and back) of all certifications.
3. Each applicant should submit 2 reference letters or Reference Forms. Adults should only complete reference letters/forms. (No relatives). Please have references mailed directly to the Recreation Department.
4. Please use chart below to determine what position you are applying for.

Position Applying For:

POOLS

Director	Age 25 and up	must be certified in Lifeguard training/CPR/AED/First Aid
Assistant Director	Age 21 and up	must be certified in Lifeguard training/CPR/AED/First Aid
Lifeguards	Age 16 and up	must be certified in Lifeguard training/CPR/AED/First Aid
Swim Instructors	Age 18 and up	must be certified in Lifeguard training/CPR/AED/First Aid
Swim Team Coach	Age 18 and up	Coaching Experience Preferred
Dive Team Coach	Age 18 and up	Coaching Experience Preferred
Desk Attendants	Age 16 and up	

Day Camps (8:45-3:15)/ Tiny Tots (8:45-12:15)

Director	Age 25 and up	Certified in RTE/CPR for Professional Rescuer/Epi Pen
Assistant Directors	Age 21 and up	Certified in RTE/CPR for Professional Rescuer/Epi Pen
Specialists		
Arts and Crafts	Age 20 and up	Certified in RTE/CPR for Professional Rescuer/Epi Pen
Athletics (DC)	Age 20 and up	Certified in RTE/CPR for Professional Rescuer/Epi Pen
Music (TT)	Age 20 and up	Certified in RTE/CPR for Professional Rescuer/Epi Pen
Tennis Instructor	Age 20 and up	Certified in RTE/CPR for Professional Rescuer/Epi Pen
Senior Counselor	Age 18 and up	Completed 12 th grade with experience
Junior Counselor	Age 16 and up	Completed 10 th or 11 th grade with experience
Counselor in Training	Age 15	Completed 9 th grade
	(CIT is an unpaid position)	

Park/Pool Maintenance

Groundskeeper/Maintenance	Age 18 and up	Completed 12 th grade with related experience
---------------------------	---------------	--

General Programs

Program Instructor	Age 21 and up	Completed 12 th grade with related work experience
Program Leader	Age 18 and up	Completed 12 th grade with related work experience
Program Assistant	Age 16 and up	Completed 10 th grade with related work experience

Other _____

Applicant MUST complete this application

APPLICATION FOR SEASONAL EMPLOYMENT

TOWN OF BEDFORD RECREATION AND PARKS DEPARTMENT

425 Cherry Street
Bedford Hills, NY 10507
914-666-7004

(PLEASE PRINT)

LAST NAME		FIRST NAME		MIDDLE NAME	
ADDRESS NUMBER	STREET	CITY	STATE	ZIP CODE	
TELEPHONE NUMBER (S)			E-mail Address		
HOME:	CELL:				

POSITION (S) APPLYING FOR:

Refer to Positions on Employment Application Instruction Sheet

--

EDUCATION

	Name and Address Of School	Course of Study	Dates of Attendance	Diploma/ Degree
Middle/Junior High School		N/A		
High School		N/A		
Undergraduate College				
Graduate Professional				

High School Grade completing by end of school year _____

College grade/year completing by end of school year _____

Employment Experience (Include volunteer and/or babysitting positions) Start with most recent job

1

Employer	Address	Phone Number	
Job Title	Supervisor	Dates Employed	
Work Performed	Reason For Leaving	Hourly Rate/Salary	May we contact your employer

2

Employer	Address	Phone Number	
Job Title	Supervisor	Dates Employed	
Work Performed	Reason For Leaving	Hourly Rate/Salary	May we contact your employer

3

Employer	Address	Phone Number	
Job Title	Supervisor	Dates Employed	
Work Performed	Reason For Leaving	Hourly Rate/Salary	May we contact your employer

If you need additional space, please continue on a separate sheet of paper.

REFERENCES (Adult references only - No relatives)

1.

Name

Relationship

Phone #

Address

2.

Name

Relationship

Phone #

Address

3.

Name

Relationship

Phone #

Address

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Are you a United States citizen? Yes No

If no, do you have a Resident Alien Card? Yes No

On what date are you available to work? _____

Have you ever been convicted of a crime? Yes No

If yes, explain _____

Driver's License number: _____ State: _____

Additional Information

Describe any specialized training, experience, skills and /or interest that will give us a better overview of your experience.

Certifications

Indicate any certifications that you currently possess. You must also attach a photocopy of each certificate.

NAME OF CERTIFICATIONS	ORGANIZATIONS	EXPIRATION DATE
Aquatics Training Please list all certifications below		
First Aid and CPR Classes Please list all certifications below		
Other		

I CERTIFY THAT ALL THE INFORMATION CONTAINED HEREIN IS TRUE AND AUTHORIZE APPROPRIATE VERIFICATION.

Applicant's Signature

Today's Date

If you are under the age of 18 your parent/guardian must sign. Their signature below indicates they have reviewed all information and the information contained in this application is accurate.

Parent/Guardian signature for applicant if under 18

Today's Date

For Department Use Only

Date received application _____

Arrange an Interview Yes No Forward to _____ Department

Date/Time of Interview _____

On Time for interview _____

Interviewed by _____

Position applying for _____ Location of job _____

Remarks: _____

<p>RECOMMENDED FOR EMPLOYMENT _____ YES _____ NO _____ ALT</p> <p>Job Title _____ Date of Employment _____</p> <p>Job Location _____ Hourly Rate/ Salary _____</p>
--

Supervisors Signature _____

Date _____

Reference Form

To be completed by Applicant: (Please type or print)

Applicant's Name: _____

Applicant's Address: _____

Position applying for: _____

To be completed by reference (Please type or print)

The person whose name is listed above has applied for a job with The Town Of Bedford. The applicant has listed you, as a person willing to give an evaluation. Please take a few minutes to review the candidate as well as any additional information you can give us. All information will be kept confidential.

How long have you known the applicant: _____

In what capacity have you known the applicant? _____

Please rate the applicant on the following criteria:

	Excellent	Good	Satisfactory	Poor	Cannot Assess
Relationship with children					
Relationship with peers					
Relationship with adults					
Ability to work as part of a team					
Cooperation with others					
Quality of work					
Energy level					
Responsibility					
Initiative					
Leadership					
Sense of humor					
Consciousness of safety					
Emotional stability					
Response to supervision					
Response to criticism					
General Evaluation					

Would you recommend the applicant for a job with the Town of Bedford? _____

Please feel free to write any additional comments that might assist us in evaluating the applicant.

We often make follow-up phone calls to have a personal contact with references. Please let us know your phone number and what would generally be a good time to contact you. Thank you. **Please return to the Town of Bedford Recreation and Parks Department, 425 Cherry Street, Bedford Hills, NY 10507, or Fax to 914-666-3863.**

Telephone: _____

Time: _____

Your Name _____

Signature _____

Reference Form

To be completed by Applicant: (Please type or print)

Applicant's Name: _____

Applicant's Address: _____

Position applying for: _____

To be completed by reference (Please type or print)

The person whose name is listed above has applied for a job with The Town Of Bedford. The applicant has listed you, as a person willing to give an evaluation. Please take a few minutes to review the candidate as well as any additional information you can give us. All information will be kept confidential.

How long have you known the applicant: _____

In what capacity have you known the applicant? _____

Please rate the applicant on the following criteria:

	Excellent	Good	Satisfactory	Poor	Cannot Assess
Relationship with children					
Relationship with peers					
Relationship with adults					
Ability to work as part of a team					
Cooperation with others					
Quality of work					
Energy level					
Responsibility					
Initiative					
Leadership					
Sense of humor					
Consciousness of safety					
Emotional stability					
Response to supervision					
Response to criticism					
General Evaluation					

Would you recommend the applicant for a job with the Town of Bedford? _____

Please feel free to write any additional comments that might assist us in evaluating the applicant.

We often make follow-up phone calls to have a personal contact with references. Please let us know your phone number and what would generally be a good time to contact you. Thank you. **Please return to the Town of Bedford Recreation and Parks Department, 425 Cherry Street, Bedford Hills, NY 10507, or Fax to 914-666-3863.**

Telephone: _____

Time: _____

Your Name _____

Signature _____