

**2020**

**TOWN OF AURORA PARKS & RECREATION**  
**300 GLEED AVENUE, EAST AURORA, NY 14052**

**PLEASE RETURN APPLICATION TO: Elaine Schiltz – Special Events Coordinator by 3/10/20**

Complete the application by printing in ink

**Today's date:** \_\_\_\_\_

**Program or position applying for:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Date of Birth\*** \_\_\_\_\_

**Address** \_\_\_\_\_  
(Street) (Town) (Zip Code)

**Cell Phone #** \_\_\_\_\_ **Home phone #** \_\_\_\_\_

**Email address** \_\_\_\_\_

**Rules and regulations for potential employees:**

1. Residents, 15 years or older, may be considered for a position. Nonresidents may apply with the understanding that they will only be considered if a resident cannot fill the position.
2. Youth, 17 years and younger, **MUST have Working Papers submitted with this application.** Please go to your High School for Working Papers application.
3. To be considered for any recreation position, you must have a Social Security number and a current Red Cross or American Heart Association CPR and First Aid card. Classes will be offered in June for hired employees if needed. (Applicants may apply without the certifications, but they will not be permitted to work until they have become certified through courses offered by the Dept. of Parks & Recreation.)
4. Applicants may be scheduled for an employment interview.

**CERTIFICATION INFORMATION** – Attach a copy of all current certifications if they were not earned through the Rec. Dept.

<b><u>Type</u></b>	<b><u>Current</u></b>	<b><u>Expiration date</u></b>	<b><u>Certification from</u></b>
CPR/AED	_____	_____	_____
First Aid & Safety	_____	_____	_____
Responding to Emerg.	_____	_____	_____

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\*The New York State law against discrimination prohibits discrimination because of age, sex, or transportation.

<u>Education</u>	<u>School</u>	<u>Location</u>	<u>Year/Degree</u>
High School	_____		
College	_____		
Other (specialized training, etc.)	_____		

**Work Experience**

Organization/Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Dates \_\_\_\_\_ Description of Duties \_\_\_\_\_

**Volunteer Experience**

Organization/Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Dates \_\_\_\_\_ Description of Duties \_\_\_\_\_

**References - Please give 3 adult references - no relatives.**

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**APPLICANT'S AREAS OF INTEREST**

**Please check program(s) that you're interested in working**

- Baseball       Drama       Street Hockey       Song & Dance       Lacrosse       Badminton
- Tennis       Tot Program       Basketball       Day Camp       Art       Field Hockey
- Track       Soccer       Volleyball       Adults with Special needs programs (Kickball and/or Floor hockey)

Have you ever supervised children in any of the above?  yes  no

If yes, where and when \_\_\_\_\_

Briefly state your reasons for wanting to work for the town \_\_\_\_\_

What do you feel you will be able to offer the program? \_\_\_\_\_

Except for minor traffic violations and adjudications as youthful offender, wayward minor or juvenile delinquent, have you ever been convicted of an offense against the law, forfeited collateral or are under charges for any offense against the law?  yes  no

All of the information contained above shall be true and correct to the best of my knowledge.

**DATE** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_