

**PELHAM RECREATION DEPARTMENT**

Richard J. Daronco Town House- 20 Fifth Avenue  
Pelham, New York 10803-1502

**JOB APPLICATION**

Return this application with information requested to the above address.  
(The information in this application will be held in strict confidence)

**PERSONAL**

NAME (Print) \_\_\_\_\_ DATE \_\_\_\_\_  
Last First

ADDRESS \_\_\_\_\_  
Street Town State

PHONE (h) \_\_\_\_\_ (c) \_\_\_\_\_ E-Mail \_\_\_\_\_

DOB \_\_\_\_\_ GRADE \_\_\_\_\_ AGE \_\_\_\_\_ SS# \_\_\_\_\_

SEX: MALE \_\_\_\_\_ FEMALE \_\_\_\_\_ POSITION DESIRED \_\_\_\_\_

**REFERENCES**

List three (3) people including Name, Address, Telephone Number & Occupation, non-relatives, who can vouch for your character and ability:

NAME: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Occupation \_\_\_\_\_

NAME: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Occupation \_\_\_\_\_

NAME: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Occupation \_\_\_\_\_

**EDUCATION**

SCHOOL	NAME & ADDRESS	GRADUATION DATES	DEGREES/ MAJORS
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HIGH SCHOOL \_\_\_\_\_

COLLEGE \_\_\_\_\_

OTHER \_\_\_\_\_

Are you familiar with First Aid? \_\_\_\_\_ Do you have a Red Cross Certificate? \_\_\_\_\_ Expiration Date \_\_\_\_\_

In the following list check **once** those in which you have had special training, **twice** those you have organized/directed in which you are prepared to train others, **three** times where you had paid experience:

Arts & Crafts \_\_\_\_\_ Basketball \_\_\_\_\_ Dancing \_\_\_\_\_ Drama \_\_\_\_\_ Football \_\_\_\_\_ Volleyball \_\_\_\_\_ Other \_\_\_\_\_

**SWIMMING** Indicate Certificate: Swimming Instructor \_\_\_\_\_ CPR \_\_\_\_\_ Senior Life Saving \_\_\_\_\_  
Junior Lifesaving \_\_\_\_\_

Have you ever worked as a Lifeguard before? \_\_\_\_\_ Where? \_\_\_\_\_ When? \_\_\_\_\_

**EXPERIENCE**

What other related experience with teaching and recreation have you had?

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Give details of any special training, experience or interest.

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Indicate what sports you have officiated: \_\_\_\_\_

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What are your hobbies or outside interests? \_\_\_\_\_

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**PREVIOUS EXPERIENCE AND EMPLOYMENT**

<b>DATES</b>		<b>EMPLOYER/ADDRESS</b>	<b>TYPE OF WORK/ POSITION</b>	<b>SALARY</b>	<b>REASON FOR LEAVING</b>
<b>FROM</b>	<b>TO</b>				

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**MEDICAL HISTORY**

Any handicaps or disabilities? \_\_\_\_\_ If so, please indicate: \_\_\_\_\_

Have you ever had any serious illness or operations? \_\_\_\_\_ If so, please indicate: \_\_\_\_\_

Why are you seeking this kind of employment? Can you list two or three good reasons?

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Availability Mon \_\_\_ Tue \_\_\_ Wed \_\_\_ Thur \_\_\_ Fri \_\_\_

Availability: Afterschool \_\_\_\_\_ Evenings \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ If yes, explain (attach additional 8-1/2 x 11 sheet).

I HEREBY VERIFY THAT THERE ARE NO WILLFUL MISREPRESENTATIONS AND NO FALSIFICATIONS OF THE ABOVE STATEMENTS AND ANSWERS TO QUESTIONS.

\_\_\_\_\_  
SIGNATURE

Best time for interview \_\_\_\_\_

Interviewed by \_\_\_\_\_

Date \_\_\_\_\_