TOWN OF ONONDAGA PARKS & RECREATION

4834 Velasko Road Syracuse, NY 13215 (315) 469-3464 - Fax: (315) 469-2816 www.townofonondagarecreation.com

MEMORANDUM

TO:	Returning Summer Staff		
FROM:	Jack Davison, Recreation Superv	visor	
RE:	2018 Summer Employment		
DATE:	January 2, 2018		
guarantee of unless you witto obtain furt	employment, but it is important is sh to speak with me. I may, how	to indicate you ever, call you t are rehired, yo	e department this summer. This is NOT a r interest. You need not sign up for an interview o schedule an appointment if I feel it is necessary ou will be notified between May 28th and June 9-3464.
NAME:			
PHONE:		EMAIL:	
ADDRESS:			
CHECK YOUR	SITE OF CHOICE:		
WHEE	LER SCHOOL (Ages 5-8)		KING PARK
ONON	DAGA HIGH SCHOOL (Ages 9-14)		ONONDAGA HILL MIDDLE SCHOOL (PRE-K)
SANTA	ARO PARK		
POSITIONS IN	ITERESTED IN:		
PLAYG	ROUND/PRE-K SUPERVISOR		PLAYGROUND AIDE / PRE-K
PLAYG	ROUND LEADER		CIT (15 & 16 yrs. old)
AREA OF INTE	EREST (LEADER POSITION):		
ARTS 8	& CRAFTS		SPORTS & GAMES
	e June 26 - 28. If you were to be		O (not July 4), Monday through Friday. Staff ou have any conflicts with these dates? If yes,

Please write down any suggestions you may have to make our playgrounds run smoother. Fill out the employment application and all other paperwork.

Town of Onondaga Parks and Recreation Department

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GENERAL EMPLOYMENT APPLICATION

Position Applying For:	Date:				
Name:		Cell Phone:			
Address:					
House # E-mail Address:	Street	City	Zip		
EDUCATION			Check one		
High School:		Grade Completed:	9 10 11 12		
College:		Year Completed:	Fr So Jr Sr		
Major:		Degree:			
CRIMINAL RECORD					
_		oar to employment. Each case is evaluated cifics to any question answered "Yes" in the			
Yes No	Have you ever been dismissed fr	om any employment due to disciplinar	ry reasons?		
Yes No	Have you ever been convicted of	f a crime, other than a minor traffic or	parking violation?		
If YES, please explain:					
	ALL STATEMENTS ARE S	UBJECT TO VERIFICATION			
statements made by me background check, and t	in connection with this application	ing any attached papers) are true. I under are subject to investigation and verification and verification in the second second in the second second in the second second second second second second second second second sec	on, including a		
Applicant's Signature:		Date:			

WORK EXPERIENCE – Please indicate with check if employment was volunteer work. ______ Dates Worked: ______ Employer: Employer Address: Street City Zip Supervisor's Name: E-mail Address: _____ Phone: _____ Volunteer Work Performed: _____ Reason for Leaving: _____ Employer: Dates Worked: Employer Address: _____ Street Zip City Supervisor's Name: _ E-mail Address: _____ Phone: _ Volunteer Work Performed: Reason for Leaving: REFERENCES Give the names, addresses, and phone #s of three persons (not relatives) having knowledge of your character, experience, work habits, and abilities. Name: ______ Relationship: _____ E-mail Address: ______ Phone: ______ Phone: Name: Relationship: E-mail Address: Phone: Name: ______ Relationship: ______ E-mail Address: Phone: Please list any clubs, hobbies, special interests, or volunteer experiences.