



Application for Seasonal Employment

Monroe Parks & Recreation Department

Application must be filled out in its entirety and legible for acceptance and consideration.

(PLEASE PRINT)

Consult job description for qualifications before applying on website (www.Monroerec.org) Copies of all certifications (e.g. LGT, WSI, SFA, AED, CPR, etc.) must be attached or application will not be accepted.

Please check off which position you are interested in:

+Lifeguard____ +Water Safety Instructor (WSI)____ #Admissions Monitor____ #SFD Camp Counselor____
 *Seasonal Park Ambassador____ *SFD Camp Assistant Camp Director____ *SFD Camp Director____
 @SFD Tweens Adventure Coordinator____
 *21 years of age or older @18 years of age or older
 +16 years of age or older with valid & current certifications at time of application
 #16 year of age or older

How Did You Learn About Us?

☐ Advertisement ☐ Employment Agency ☐ Friend ☐ Relative ☐ Walk-In Other_____

PERSONAL INFORMATION

Name_____ Last First Middle

Present Address_____ Street City State Zip

Permanent Address_____ Street City State Zip

Phone No._____ Are you 16 years or older? Yes ☐ No ☐

Email Address_____

Are you either a U.S. Citizen or authorized to work in the United States? Yes ☐ No ☐

EMPLOYMENT DESIRED

Position_____ Date you can start____/____/____ Salary Desired_____

Have you ever worked for the Town? Where_____ When_____

Can you perform the essential functions for this position with or without reasonable accommodation?_____

Do you have friends or relatives working here?_____ If yes, list name and relationship to you_____

Education	Name and Location of School	No. of years attended	Did you Graduate?	Subjects studied
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High School or GED

College/Trade School

FORMER EMPLOYERS (LIST EMPLOYERS, STARTING WITH THE MOST CURRENT)

Month and Year	Name and Address of Employer	Salary	Position	Reason for leaving
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From _____

To _____

From _____

To _____

From _____

To _____

Additional Information

Other Qualifications: List special job-related skills, certifications, and qualifications you possess _____

References: Give the names of three business references not related to you, whom you have known at least one year.

Name	Address	Phone	Business	Years Acquainted
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1. _____

2. _____

3. _____

In case of emergency, notify _____

Name

Address

Phone No.

EMPLOYEE CERTIFICATIONS AND AGREEMENTS

I authorize representatives of the Town of Monroe to obtain pertinent information from my previous employers, references, and other persons with knowledge of my work history and background. I authorize my previous employers, references, and persons with knowledge of my work history and background to provide pertinent information to the Town and hereby release all such persons and waive any and all claims, demands or causes of action whatsoever, in connection with the request for the release of such information.

I certify that the information or falsifications will be reason for withdrawal of a job offer or termination of employment whenever the omission or falsehood is discovered. I authorize any investigation into the statements I have made in this application as necessary to arrive at an employment decision.

All employees of the Town of Monroe have the right to resign from their jobs at any time, for any reason or for no reason at all, with or without advance notice. The Town retains the same right with respect to termination of any employee's employment. No manager, supervisor or other individual of the Town of Monroe has authority to make a commitment of guaranteed or continuing employment to you, and no document or publication of the Town should be interpreted to make such a guarantee. Nothing stated by the Town of Monroe, in writing or orally, during the interview and/or hiring process is to be construed as creating a contract between the applicant and the Town of Monroe.

I have read, understand and agree to the foregoing.

I recognize and acknowledge that the Town of Monroe is fully committed to a work place free from illegal drugs. In this regard, I expressly consent to a pre-employment drug test, the results of which will be considered by the Town in its decision to hire me.

Signature of Applicant_____
Date

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. EOE