

Town of Carlisle

Recreation Department

66 Westford Street

Carlisle, MA 01741

Phone 978-369-9815

Fax 978-371-6686

E-Mail: rec@carlisle.org

2/3/06

JOB APPLICATION – SUMMER FUN 2006

(In order to qualify for employment you must be at least 15 yrs. before January 1, 2006)

Name _____ E-Mail _____

Address _____ Home# _____ Cell# _____

Town _____ Zip _____ DOB _____ SS # _____

Emergency Contact: _____ Phone _____

- ♦ Carlisle Summer Fun Program will operate for (3) 2 week Sessions from:
July 5 thru Aug. 11, 2006 from 9:00 am to 3:00 pm at the Carlisle Public School
- ♦ Orientation: Thursday, June 29 OR (Back up date: Friday, June 30). Mandatory attendance at Orientation/Set up/CPR/First Aid (paid day – Thur. June 29th (9:00 - 2:00 pm), in order to qualify for employment - exceptions require permission from Recreation Director.
- ♦ Will you be available to attend Orientation? _____ If NO, please state reason _____

- ♦ Have you been previously employed by the Town of Carlisle? _____
In what capacity? _____

- ♦ Circle the Sessions available to work: (you must be available to work a complete session)

Session A:

(Wed) July 5 to July 14

Session B:

July 17 to July 28

Session C:

July 31 to Aug 11

- ♦ Additional weeks available to Substitute – please circle.
July 5 July 10 July 17 July 24 July 31 Aug 7
- ♦ Are you available to work before camp? (Early Drop Off: 8:15 to 9:00 am) Yes No
- ♦ Have you taken First Aid and CPR Training? _____ Date: _____
(Recreation will offer First Aid, CPR and CPR refresher classes on Thur. June 29 during Orientation)
Mandatory for all employees – if classes have not been taken within the past 12 months.

Are you willing to perform Community Service for all or part of the time? Yes No
Number of hours: _____

- ♦ Work and/or Volunteer Experience?

- ◆ **What special skills do you have?** (include CIT, WSA, WSI, leadership, coaching experience, certification, babysitting, horse riding, sports, hobbies, etc.)

Program Leaders

Recreation is always looking for individuals with special interests or skills who are interested in leading or coaching a particular activity. Please indicate your ideas. (For example: Orienteering, Arts & Crafts, Workreation, Basketball, Soccer, Tennis, etc.) Call us if this is of interest to you, so we may discuss these options further: 978-369-9815.

- ◆ **Why would you like a summer job with the Carlisle Recreation Program?**

References

Name	Phone
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Name	Phone
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Name	Phone
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- ◆ Additionally, the State of Massachusetts requires that all employees be CORI checked.
- ◆ Apply before March 15, 2006 for the best opportunities. Late applications will be considered for substitutes and any new positions. You will be contacted in early April regarding employment. If you have any questions, please call: 978-369-9815.
- ◆ Please send a copy of any certifications you have, along with this application.
- ◆ **Mail completed application to: Carlisle Recreation, 66 Westford Street, Carlisle, MA 01741**

Signature _____ **Date** _____

Thank you for your interest in working with the Carlisle Recreation Program.