



ALAMEDA RECREATION AND PARK DEPARTMENT

2226 Santa Clara Avenue, Alameda, CA 94501 · (510) 747-7529
http://www.cityofalamedaca.gov/Recreation/Employment-Opportunities



2013 DAY CAMP LEADER APPLICATION

Please write legibly

NAME: _____ DATE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

HOME PHONE: (____) _____ CELL PHONE: (____) _____

E-MAIL ADDRESS _____

POSITION APPLYING FOR? _____

NOTE: ALL PERSONS UNDER 18 YEARS OF AGE MUST SUBMIT A WORK PERMIT IF HIRED

ARE YOU 16 YEARS OF AGE OR OLDER? YES _____ NO _____
IF NOT, WILL YOU BE 16 YEARS OF AGE BY TIME OF APPOINTMENT? YES _____ NO _____
ARE YOU 18 YEARS OF AGE OR OLDER? YES _____ NO _____
IF NOT, WILL YOU BE 18 YEARS OF AGE BY TIME OF APPOINTMENT? YES _____ NO _____

DRIVER'S LICENSE NUMBER: _____ STATE ISSUED: _____ EXP. DATE: _____

DO YOU HAVE: STANDARD FIRST AID CARD? YES _____ NO _____ IF YES, EXP. DATE _____

CPR CARD? YES _____ NO _____ IF YES, EXP. DATE _____

NEGATIVE T.B. TEST? YES _____ NO _____ IF YES, DATE OF TEST: _____

IN CASE OF AN EMERGENCY, CONTACT _____ RELATIONSHIP _____

HOME PHONE (____) _____ CELL PHONE (____) _____

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES", GIVE DETAILS. (A "Yes" answer will not automatically disqualify you.)	REMARKS (Attach a separate sheet if needed):
Have you, since age 18, been convicted of a violation of the law? (Do not include traffic under \$400. A fingerprint check will be made.) <input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever been discharged or forced to resign from employment? <input type="checkbox"/> YES <input type="checkbox"/> NO	

EDUCATION

CIRCLE HIGHEST YEAR COMPLETED BY JULY OF THIS SCHOOL YEAR: 9 10 11 12

NAME OF HIGH SCHOOL _____ LOCATION: _____

DID YOU GRADUATE FROM HIGH SCHOOL? YES _____ NO _____ G.E.D. _____

COLLEGE, BUSINESS OR TRADE SCHOOL ATTENDED	ATTENDANCE DATES		MAJOR SUBJECTS	UNITS COMPLETE	DEGREE & YEAR
	FROM	TO			

LIST COURSES RELATED TO RECREATION AND CAMPING _____

JOB EXPERIENCE - PAID AND/OR VOLUNTEER

NAME OF EMPLOYER AND/OR VOLUNTEER ORGANIZATION	DATES		TITLE	DUTIES	SUPERVISOR'S NAME & PHONE #
	FROM	TO			

REFERENCES - Give names of two persons not related to you whom you have known at least 2 years

NAME	RELATIONSHIP	PHONE	YEARS KNOWN

OTHER EXPERIENCE - SCOUTS, SOCIAL, SCHOOL ACTIVITIES

1. _____
2. _____
3. _____

CAMP EXPERIENCES - AS A CAMP LEADER OR A CAMPER:

<u>NAME OF CAMP</u>	<u>LOCATION</u>	<u>DATE</u>	<u>FAVORITE ACTIVITY</u>
---------------------	-----------------	-------------	--------------------------

_____	_____	_____	_____
_____	_____	_____	_____

LEADERSHIP ABILITIES AND CAMP SKILLS:

- | | | |
|-----------------|-------------|------------------------|
| ___ ARCHERY | ___ CRAFTS | ___ HIKING-TRAIL SIGNS |
| ___ NATURE LORE | ___ COOKING | ___ DRAMA |
| ___ GAMES | ___ MUSIC | ___ SWIMMING |

LIST HOBBIES AND/OR SPECIAL INTERESTS: _____

DAY CAMP RUNS FROM **JUNE 10** THROUGH **AUGUST 9, 2013** (Summer Only)

DATES YOU ARE AVAILABLE TO WORK: JUNE _____ THROUGH AUGUST _____

I hereby certify that all statements made in this application are, to the best of my knowledge, true and complete and that any misstatements of natural facts will subject me to disqualification or dismissal.

Signature _____ **Date** _____

Interview Preference List:

Please allow two (2) weeks to process applications and schedule an interview.

DATES:

TIMES:

- | | |
|----------|--------------------|
| 1. _____ | 1. _____ a.m./p.m. |
| 2. _____ | 2. _____ a.m./p.m. |
| 3. _____ | 3. _____ a.m./p.m. |

Printed on Recycled Paper

“60 Years Of Tradition”