

Dear Applicant,

Thank you for your interest in a position with the East Windsor Recreation Department 2019 Summer Camp Program. Please carefully read below for information pertaining to the application and interview process.

- **All applications are due NO LATER than Friday, March 29, 2019. The earlier you submit your COMPLETED application, the better! Please return COMPLETED applications to the East Windsor Recreation Department in the Municipal Building, 16 Lanning Boulevard, East Windsor, NJ 08520.**
- Applications will be online on the township website, www.east-windsor.nj.us, or at the Recreation Front Desk in the Municipal Building.
- Age requirements are as follows:
 - Counselor – 16 years old
- Lifeguards must have proof of certification submitted by **May 31, 2019**.
- Please be mindful that these positions are for the **entire** 8-week program, plus Camp Orientation and one (1) Recreation Event.
 - Camp Orientation will be Saturday, June 22, 2019 from 9:00 a.m. – 4:00 p.m.
 - Camp will run from Monday, June 24, 2019 through Friday, August 16, 2019.
 - Recreation Department special events take place on evenings throughout the summer months. Each camp staff member is **required** to work at least one (1) of these events, as per each staff contract. Event assignments will take place at orientation.
- ALL staff will be required to be CPR/AED certified. The Recreation Department will be holding one mandatory certification class in June. Date to be determined. If certified (must not expire during the summer), please provide proof along with your application.
- Applicants who meet our criteria for potential summer employment will be contacted by phone or email to schedule an interview during the month of April.

If you have any additional questions, please email recreation@east-windsor.nj.us or contact the Recreation Department at 609-443-4000, extension 225.

Thank you for your interest!

Joyce W. Ferejohn, Director of Recreation

EAST WINDSOR TOWNSHIP RECREATION DEPARTMENT

SUMMER CAMP EMPLOYMENT APPLICATION

Please type or print all information.

NAME _____ **DATE OF BIRTH** ____/____/____
LAST FIRST MIDDLE INITIAL MM DD YYYY

ADDRESS _____
STREET CITY STATE ZIP

HOME PHONE _____ **CELL PHONE** _____ **SOCIAL SECURITY #** _____

EMAIL ADDRESS (PLEASE PRINT) _____

POSITION APPLYING FOR

PLEASE CIRCLE ALL THAT APPLY

FULL TIME:	Program Supervisor	Assistant Supervisor	Counselor
	Lifeguard	Art Program Coordinator	
*PART-TIME:	Counselor	Morning Care Counselor (7am – 9am)	Afternoon Care Counselor (3pm – 6pm)

**Part time opportunities are limited but may be a perfect option for those candidates that cannot commit to the full time 8 week commitment or with other summer obligations i.e. sports, baby sitting, travel etc.*

Please list any previous Township employment (position and dates): _____

Please list any certifications/licenses (CDL, First Aid, CPR, AED, Epi-Pen, etc.) that you currently possess AND will be current through 8/16/19: _____

In a short paragraph, please tell us something about yourself and why you wish to work for the East Windsor Recreation Department: _____

REFERENCES

NAME	TITLE/POSITION	ADDRESS	TELEPHONE NUMBER
1.			
2.			
3.			

EDUCATION

	NAME/ADDRESS	DATES ATTENDED	DEGREE	MAJOR/CERT.
HIGH SCHOOL				
COLLEGE/UNIVERSITY				
OTHER (PLEASE SPECIFY)				

Camp Orientation is tentatively scheduled for **June 22, 2019.**

Camp is tentatively scheduled for **June 24, 2019 – August 16, 2019.**

Please list any dates that you know (or expect) you will not be available during that time.

Any accommodations are up to the discretion of the Camp Director
and proper documentation must be provided to the Recreation Department.

PLEASE ATTACH A RESUME AND/OR LISTING OF PREVIOUS WORK EXPERIENCES. PLEASE INCLUDE THE NAME OF THE ORGANIZATION, SUPERVISOR, ADDRESS, PHONE NUMBER, JOB TITLE, RESPONSIBILITIES, AND OTHER PERTINENT INFORMATION.

I HEREBY AUTHORIZE the release of the information listed herein concerning me to the Township of East Windsor and absolve the Township of East Windsor from liability for use of same. I HEREBY DECLARE the information provided to me to be true, correct, and complete. In addition, I authorize the Township of East Windsor to obtain background information concerning my driving and personal record and release the Township of East Windsor from any liability regarding the use of this information. I do this willingly, knowingly, and as a volunteer act.

SIGNATURE _____

DATE _____