



TOWN of HALFMOON
Recreation Department

2 Halfmoon Town Plaza
Halfmoon, NY 12065
County of Saratoga

Phone: (518) 371-7410, ext.217
Fax: (518) 371-0936
www.townofhalfmoon.org
Hmsummer@townofhalfmoon.org



Shannyn McCarthy, Assistant Director

TO: **Potential Employees**
FROM: Shannyn McCarthy, Assistant Director
DATE: February 3, 2010
RE: Job requirements

Thank you for your interest in becoming a staff member this summer! Below are some examples of requirements for our summer staff:

- ✓ Staff members must be at least 16 years of age (bus drivers must be 21 or older)
- ✓ Bus drivers must be **current** Shenendehowa employees
- ✓ Staff members under the age 18 must be able to provide working papers
- ✓ Staff members must be available Monday through Friday, June 28 to August 6, 2010 during the hours of 8am to 4pm (or later depending on late trip times)
- ✓ Attendance to orientation is **mandatory**
- ✓ Staff shirts are made available at orientation – the shirts must be worn everyday and must be returned the last day of camp
- ✓ Staff visors are available at orientation – they must be worn at the Trip Coordinator's discretion
- ✓ Staff name tags will be available the first day of camp – they must be worn the first week of camp and at the Site Director's discretion

Please complete the enclosed application in full and return it to my office. The deadline for all completed applications is **March 19, 2010**. If you have any questions, please contact my office at 371-7410, ext. 2700.

SUMMER RECREATION EMPLOYMENT APPLICATION (2010)

* Counselors / Specialists *

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: () ____ - ____ 2nd PHONE NUMBER: () ____ - ____

SOCIAL SECURITY # _____ - _____ - _____ DATE OF BIRTH: ____ / ____ / ____

Email Address: _____

POSITION APPLYING FOR (PLEASE CHECK ALL THAT APPLY):

* Need to be 16 yrs old and completed 2 yrs of high school to be eligible for:

Grade level preference: (check all that apply)

Counselor Grades 1- 3 _____

Counselor Grades 4 – 6 _____

Counselor Grades 7 – 10 _____

Wrap around Counselor AM _____ PM _____

(This position is extra hours and does not interfere with regular work schedule)

* Need to have completed 2 yrs of college and/or completed High school with related instruction and experience to be eligible for:

Arts & crafts director _____

Sports director _____

Trip coordinator _____

Working supervisor _____

Tot rec. Assistant _____

* Need to be 17 years old and completed lifeguard training with CPR instruction to be eligible for:

Lifeguard/swim instructor _____

Why do you feel you should be hired for this position? What do you see the role of your applied for position(s) to be?

Have you any work experience in the related field of childcare, recreation, or education?
(Be specific)

Dates of any anticipated days off (college orientation, graduations, etc.); also state the reason for the days off. **Please note that vacation days or weeks are prohibited.**

Are you presently working, in school, etc...?

Special interest or hobbies and community involvement?

Do you have any serious limitations, medical problems or allergies that we should be made aware of? If so, please explain.

Do you have CPR, First Aid or Lifeguard training? (Please attach copies of certificates and / or cards).

Are your immunizations up to date? Yes _____ No _____

What shirt size would you prefer? S _____ M _____ L _____ XL _____

Please list three (3) references below and have two of the three complete a "Reference Check Form" (attached). They may be working and / or personal, please no immediate family members.

NAME

PHONE

1.) _____

2.) _____

3.) _____

PLEASE NOTE

Our Summer Recreation Program will run from Monday, June 28 through Friday, August 6, 2010. In order to be eligible for an interview to work for our Program, please mail a completed **application**, two (2) "**Reference Check**" Forms and attached **county application** to the address below no later than **March 19, 2010.**

Recreation Director
Town of Halfmoon Recreation Program
2 Halfmoon Town Plaza
Halfmoon, NY 12065

Reference Check Form

Name of **Applicant**: _____

Relationship to **Applicant**: _____

If work related, please give job title & duties:

Please rate the Applicant where applicable on the following characteristics by placing an "X" under the heading:

| | POOR | FAIR | AVERAGE | VERY GOOD | EXCELLENT |
|--------------------------|-------------|-------------|----------------|------------------|------------------|
| Quality of work | | | | | |
| Suitability for position | | | | | |
| Personal Appearance | | | | | |
| Attendance | | | | | |
| Dependability | | | | | |
| Cooperativeness | | | | | |

The back of this form may be used for any additional comments

Completed by: Name _____ Date _____

Address _____ Phone _____

Reference Check Form

Name of **Applicant**: _____

Relationship to **Applicant**: _____

If work related, please give job title & duties:

Please rate the Applicant where applicable on the following characteristics by placing an "X" under the heading:

| | POOR | FAIR | AVERAGE | VERY GOOD | EXCELLENT |
|--------------------------|-------------|-------------|----------------|------------------|------------------|
| Quality of work | | | | | |
| Suitability for position | | | | | |
| Personal Appearance | | | | | |
| Attendance | | | | | |
| Dependability | | | | | |
| Cooperativeness | | | | | |

The back of this form may be used for any additional comments

Completed by: Name _____ Date _____

Address _____ Phone _____