

LYNN PARKS & RECREATION
 250 COMMERCIAL STREET | LYNN, MA 01905 | 781-477-7096
2015 EMPLOYMENT APPLICATION

PERSONAL STATUS

I Am Applying For: Parks & Rec. Summer Job **OR** Lynn Special Needs Camp Counselor

Name:

Address:

City:

State:

Zip Code:

E-mail Address:

Cell Phone #:

Home Phone #:

Date of Birth: ____/____/____ Lynn Parks and Recreation Applicants Must Be 17 to 21 Years Old To Apply
 Lynn Special Needs Camp Applicants Must Be 16 to 21 Years Old To Apply

ARE YOU CERTIFIED IN:

CPR:

YES

NO

FIRST AID:

YES

NO

EDUCATION

Type of School	Name of School	Location	Dates Attended (M/Y - M/Y)	Degree/Date of Completion
High School				
College				
Other				

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EMPLOYMENT RECORD		
Begin With Most Recent Employment		
1 Employment Dates From: To:	Company Name	Telephone Number
Titles and Duties		
Reason For Leaving	Supervisor's Name	Telephone Number
2 Employment Dates From: To:	Company Name	Telephone Number
Titles and Duties		
Reason For Leaving	Supervisor's Name	Telephone Number
3 Employment Dates From: To:	Company Name	Telephone Number
Titles and Duties		
Reason For Leaving	Supervisor's Name	Telephone Number

REFERENCES				
Please give the names of three (3) persons not related to you.				
Name	Address	City, State, Zip Code	Phone Number	E-mail Address

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Please use this space to add any further comments, which you believe, have enhanced your abilities to work with children, ages 6-13 years old.

How did you find out about this position?

Other comments, notes or information.

Applicant's Signature: _____

Date: ____/____/____

2015 Info:

Lynn Summer Parks Programs Run 5 Weeks | July 6th – August 7th, 2015 Monday through Friday | 9 AM to 3 PM
All applications must be returned to Lynn City Hall, Personnel Department, Room 412 by Friday, May 1, 2015

