

Approved By



# Oxford Township Parks and Recreation Application for Employment

- Full-time  
 Part-time  
 Summer  
 Internship  
 Other

ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

Date of Application:

Position(s) Sought:

## General Information

Last Name:

First Name:

Middle Initial:

Temporary  
Address until

Number

Street

Telephone 1

Telephone 2

City

State

Postal Code

E-mail

Permanent  
Address  
(if different  
from above)

Number

Street

Telephone 1

Telephone 2

City

State

Postal Code

E-mail

Social Security Number:

Are you 18 years or older?

Yes No 

Are you authorized to work in the United States?

Yes No 

Have you been previously employed here?

Yes No 

When are you available to start work?

If Yes, When?

Who was your supervisor?

Salary Desired:

Have you been convicted of a crime?

Yes No 

Do you have a valid Driver's License?

Yes No 

If Yes, Please describe?

If yes, License Number and State:

## Military Service Record

Have you had any experience in the Armed Forces of the United States or in the National Guard?

Yes No 

If yes, what branch?

Rank at Discharge

Are you in the reserves?

Yes No 

If yes, date obligation ends

### **Educational Background**

<b>School Name</b>	<b>Location</b>	<b>Date Attended</b>	<b>Degree Received</b>	<b>Major</b>

**Highlight skills obtained, relevant to the position(s) sought:**

### **Educational Experiences and Accomplishments**

**Describe your relevant courses, project work, publications, and presentations. Include awards and scholarships.**

### **Extracurricular Activities**

**Describe your extracurricular activities including class or campus offices held, volunteer experience, memberships in clubs or organizations, leadership roles, sports activities, hobbies, etc. (You are not required to mention the names of organizations that indicate race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, family status, political beliefs or disabilities).**

## Work Experience

Describe all work experience (paid and unpaid) starting with most recent.

<b>Name of Organization</b>	<b>Location</b>	<b>Phone</b>	<input type="checkbox"/> Summer <input type="checkbox"/> Part-time (# of hours/wk: _____ ) <input type="checkbox"/> Co-op <input type="checkbox"/> Internship <input type="checkbox"/> Volunteer <input type="checkbox"/> Full-time <input type="checkbox"/> Other: (specify)	
<b>Position/Title</b>	<b>Supervisor</b>			
<b>Start Date</b>	<b>Starting Pay</b>	<b>End Date</b>		<b>Ending Pay</b>
<b>Duties:</b>		<b>Reason for Leaving:</b>		
<b>Name of Organization</b>	<b>Location</b>	<b>Phone</b>	<input type="checkbox"/> Summer <input type="checkbox"/> Part-time (# of hours/wk: _____ ) <input type="checkbox"/> Co-op <input type="checkbox"/> Internship <input type="checkbox"/> Volunteer <input type="checkbox"/> Full-time <input type="checkbox"/> Other: (specify)	
<b>Position/Title</b>	<b>Supervisor</b>			
<b>Start Date</b>	<b>Starting Pay</b>	<b>End Date</b>		<b>Ending Pay</b>
<b>Duties:</b>		<b>Reason for Leaving:</b>		
<b>Name of Organization</b>	<b>Location</b>	<b>Phone</b>	<input type="checkbox"/> Summer <input type="checkbox"/> Part-time (# of hours/wk: _____ ) <input type="checkbox"/> Co-op <input type="checkbox"/> Internship <input type="checkbox"/> Volunteer <input type="checkbox"/> Full-time <input type="checkbox"/> Other: (specify)	
<b>Position/Title</b>	<b>Supervisor</b>			
<b>Start Date</b>	<b>Starting Pay</b>	<b>End Date</b>		<b>Ending Pay</b>
<b>Duties:</b>		<b>Reason for Leaving:</b>		
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<b>Position/Title</b>	<b>Supervisor</b>			
<b>Start Date</b>	<b>Starting Pay</b>	<b>End Date</b>		<b>Ending Pay</b>
<b>Duties:</b>		<b>Reason for Leaving:</b>		

## References

Do not include relatives or former employers

Name	Address	Phone Number	Years Acquainted

## Acknowledgment and Authorization

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I understand that any omission or misrepresentation with respect to this information may be cause for denial or immediate termination of employment.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date