TOWN OF STANFORD RECREATION DEPARTMENT EMPLOYMENT APPLICATION

86 Creamery Road Stanfordville, NY

(Mail to: P.O. Box 436 Stanfordville, NY 12581 ATTN: Recreation Dept.) Phone: (845) 868-7782 Email: townofstanfordrec@gmail.com

Name:	Position:			
Address:				
Email:	Birthdate:			
Phone Number:	Sch	School Attending:		
Grade/Year in School:	Shirt Size	Suit Size (Guards):		
Work Experience:				
Employer		Dates of Employment	Salary	
Duties Performed				
Employer		Dates of Employment	Salary	
Duties Performed				
Current Certifications:		Expiration Date:		
CPR:				
Other: Include talents, volunteer wor	k, hobbies, etc. that o	could be helpful in your po	osition at the park.	
References: List two non-relatives who ha	ve known you more	than three years.		
Name	Address		Phone	
Name	Address		Phone	