

North Shore Youth Council

P.O. Box 1286, Rocky Point, NY 11778-1286 - (631) 744-0207 - www.nsync.com

Senior Recreation Counselor

APPLICANTS MUST BE AT LEAST 16 YEARS OF AGE BEFORE THE PROGRAM STARTS ON JUNE 30, 2014. IN ORDER TO BE CONSIDERED FOR EMPLOYMENT, BOTH SIDES OF THIS APPLICATION MUST BE COMPLETELY FILLED OUT AND MUST BE SIGNED. INCOMPLETE APPLICATIONS WILL BE RETURNED.

Name: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

Phone: _____ E-mail: _____

Social Security Number: _____ Driver's License Number: _____

Please select the site you are applying for: Miller Place [] Rocky Point []

Education:

Name of College: _____

Name of High School: _____

Anticipated Date of Graduation: _____

Other Training: _____

Certifications: _____

Special Skills: _____

Employment History - paid or volunteer (list all positions held, include company name, dates of employment, address, phone number, name of supervisor):

1. _____

2. _____

Please describe why you wish to work for North Shore Youth Council and what you hope to accomplish: _____

Have you worked at our Summer Recreation Program in the past? _____ When? _____

Do you have friends or relatives working for NSYC? _____ Whom, and in what capacity? _____

Name, address, phone number of emergency contact: _____

Name, address, phone number of two references: (do not list relatives)

1. _____

2. _____

It is expected that if a job opportunity is offered to you, you will not take any time off unless it is an emergency. By accepting a position you are making a commitment and it is expected that you will honor that commitment.

If a job opportunity is offered to you, you MUST provide a copy of your social security card and drivers' license or other photo identification. All employees under the age of 18 who have not yet graduated must provide their working papers.

I verify that the information on this form is true and correct to the best of my knowledge.

Indicate tee-shirt size: Adult S ___ M ___ L ___ XL ___ XXL ___.

Signature: _____ Date: _____