

Town of Weymouth Human Resources Department

Robert L. Hedlund, Mayor

182 Green St.

North Weymouth, MA 02191

(781) 340-5010 | Fax 781-682-3561 | jobs@weymouth.ma.us

Interview (internal use)

Date: _____

Time: _____

Sched. by: _____

Confirm Date: _____

Parks & Recreation Summer Seasonal Employment Application

Name: _____ Cell Phone: _____ Email: _____

Will you be at least 16 years old prior to September 1, 2024?: Y | N

Did you participate in our Leader in Training (LIT) Program?: Y | N

POSITION APPLYING FOR (PLEASE CIRCLE):

CAMP WEYFUN | GREAT ESKER PARK NATURE CAMP | GEP ADVENTURE PROGRAM | ANY

Dates Available for Summer Work: Start Date: ____/____/2024 - End Date: ____/____/2024

*Please note that applicants are likely to be scheduled Monday - Friday and must have full week availability.

**The full 2024 summer season will run from June 24, 2024 through August 30, 2024. Your commitment to working a minimum of eight weeks out of the 10 week total program is required.

Hours Available (Please Circle): 7am - 12:30pm | 12:30 - 6pm | Any

How many hours per week are you seeking (Please Circle): 15 - 25 | 25 - 40

Do you anticipate requesting any time off? Y | N

If Yes, Please indicate dates you will be requesting: _____

Do you have a current Massachusetts Drivers License? Y | N

Do you currently hold any certifications that will be current through Summer 2023?:

Circle All That Apply: CPR | First Aid | Lifeguard | Food Safety

Would you be interested in Lifeguard training to enhance our waterfront safety at Camp? Y | N

What days and times would you be available for an interview?: _____

****Please note that all candidates must be available for an interview prior to employment****

What other Experiences have you had that may enhance your qualifications for this position?:

Why would you like to be a Summer Counselor?:

I, _____ hereby make application for employment with the Weymouth Parks & Recreation Department for Seasonal Summer Employment and I certify that all statements answered, including available working dates are true and accurate. Should I be hired, I will commit myself to working the full season that I am assigned. In fairness to other applicants, should I be employed by another firm/organization this summer, I will withdraw my application by phone or mail as soon as possible. The Town of Weymouth is an Equal Opportunity Employer.

Date of Application: _____ **Signature:** _____



Town of Weymouth
Human Resources Department
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N. Weymouth, MA 02191
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Employment Application

This application must be completely filled out and signed. List below all present and past employment, beginning with your most recent employment and describe all periods of employment including self-employment and military service. Employment history must be complete. Use additional sheets if necessary.

Please also attach a resume to this application

Applicant Information

Full Name: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Position Applied
for: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for this company? YES ☐ NO ☐ If yes, when? _____

Are you able to perform the essential functions of the job that you are applying for? YES ☐ NO ☐ List and provide copies of any certification(s) you may have.

Are you able to perform the essential functions of the job that you are applying for? YES ☐ NO ☐

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO
☐ ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO
☐ ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO
☐ ☐

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Please list three personal references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

CORI/SORI Notice

All candidates considered for employment must have a CORI/SORI check completed. Results from this CORI/SORI can be used in determining eligibility for employment.

Disclaimer and Signature

Additional Information – Please read carefully before signing.

1. I certify that my answers are true and complete to the best of my knowledge.
2. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my termination from employment.
3. I understand that an offer of employment is contingent upon my successful completion of the pre-employment screening process, including but limited to satisfactory references, employment history, a satisfactory criminal history inquiry, satisfactory verification of educational requirements and driver's license or certification(s) (where required) and successful pre-employment drug test and/or physical examination.
4. I agree to allow the Town of Weymouth to verify all information related to my application for employment including work history, education, and references from present and former employers.
5. I understand that the Town of Weymouth is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.
6. I understand the Town of Weymouth is an Equal Opportunity Employer.

My signature certifies that I have read and agree with the above statements in this application for employment.

Applicant signature

Date

TOWN OF WEYMOUTH
EQUAL EMPLOYMENT OPPORTUNITY FORM

Applicant Information

Full Name: _____

Last *First* *M.I.*

Address: _____

Street Address *Apartment/Unit #*

City	State	ZIP Code
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Home Phone: () _____

Position Applied for: _____

Voluntary Information

This information is being requested in accordance with federal regulations. The information is voluntary and will not be used when considering you for employment with our company.

Racial or Ethnic Group

☐ American Indian/Alaskan ☐ Asian/Pacific Islander ☐ Black/African American

☐ Hispanic/Latino ☐ White/Caucasian ☐ Other

Gender

☐ Female ☐ Male

Military Service

☐ Pre-Vietnam Era ☐ Vietnam Era

☐ Post-Vietnam Era ☐ Disabled Veteran

How did you hear about this position?

☐ Newspaper ☐ Company Employee ☐ Professional Publication

☐ Job Fair ☐ Placement Office ☐ Web Site

☐ Other