



CITY OF NEW ROCHELLE  
 515 NORTH AVENUE  
 NEW ROCHELLE, NY 10801  
 (914) 654-2087

Date Received

**APPLICATION FOR SEASONAL EMPLOYMENT**

(New Rochelle residency required except as noted in job posting)

Returning Employee  
 # \_\_\_\_\_

\_\_\_\_\_  
 Last Name First Name MI

\_\_\_\_\_  
 Street Address City State Zip Code

\_\_\_\_\_  
 Home Phone: Cell: Email: DOB:

Please indicate position(s) applying for:

**Summer Camps:**

- \_\_\_ Director/Assistant Director (\$16-\$25)
- \_\_\_ Instructor (\$15 - \$20/hr.) Sports, Performing Arts, Visual Arts, Nature, Fitness.
- \_\_\_ Recreation Specialist/ Camp Counselor (\$13 - \$15/hr.)

**Parks:**

- \_\_\_ Park Manager (\$15-\$23/hr.)
- \_\_\_ Park Attendant (\$13-\$16/hr.)
- \_\_\_ Attendant - Sidney E. Frank Skate Park (\$13-\$16/hr.)
- \_\_\_ Hourly Maintenance Laborer (\$15/hr.)

**Aquatics:**

- \_\_\_ Lifeguard: Lincoln Pool & Hudson Park (\$14 - \$25/hr.)  
 ARC Lifesaving, CPR, First Aid, Waterfront and/or Water Park Module
- \_\_\_ Head Lifeguard: Lincoln Pool & Hudson Park (\$20-\$25/hr.)  
 ARC Lifesaving, CPR, First Aid, Waterfront and/or Water Park Module
- \_\_\_ Asst. Head Lifeguard: Lincoln Pool & Hudson Park (\$18-\$25/hr.)  
 ARC Lifesaving, CPR, First Aid, Waterfront and/or Water Park Module

**Tennis:**

- \_\_\_ Pinebrook Tennis Attendant (\$13-\$16/hr.)

**Marina:**

- \_\_\_ Gas Dock Attendants (\$13/hr.)
- \_\_\_ Pump out Boat Operator (\$16/hr.)

**Seasonal Programs:**

- \_\_\_ Rec. Specialist/Monitor – Ice Skating (\$17.50/hr.)
- \_\_\_ Program Director – Youth Basketball (\$22.00/hr.)
- \_\_\_ Score Keeper – Youth Basketball (\$13.00/hr.)
- \_\_\_ Hourly Program Specialist – Adult Softball (\$35/hr)

**Aquatics and Parks positions may require evening and/or weekend assignment.**

**Certifications:** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

\_\_\_ First Aid/ Type: \_\_\_\_\_  
 \_\_\_ CPR/Type: \_\_\_\_\_

\_\_\_ Teaching:  
 State & Subject(s) \_\_\_\_\_

Special Certification(s) \_\_\_\_\_

Special Classes \_\_\_\_\_

**Aquatics:** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

First Aid/Type: \_\_\_\_\_  
 CPR Type: \_\_\_\_\_

Head Lifeguarding \_\_\_\_\_

ARC Lifeguarding: \_\_\_\_\_

Type: \_\_\_\_\_

Adapted Aquatics \_\_\_\_\_

Waterfront \_\_\_\_\_

Water Park \_\_\_\_\_

Special Skills: \_\_\_ Music/ Instrument ( \_\_\_\_\_ ) \_\_\_ Dance ( \_\_\_\_\_ )  
 \_\_\_ Art/Crafts ( \_\_\_\_\_ ) \_\_\_ Early Childhood ( \_\_\_\_\_ )  
 \_\_\_ Sports/Fitness ( \_\_\_\_\_ )  
 \_\_\_ STEM ( \_\_\_\_\_ ) \_\_\_ Wellness ( \_\_\_\_\_ )  
 \_\_\_ Nature ( \_\_\_\_\_ ) \_\_\_ Youth Development ( \_\_\_\_\_ )  
 \_\_\_ Other – Magic/Cooking/Clowning/Theater ( \_\_\_\_\_ )

(OVER)

EDUCATION	SCHOOL/INSTITUTION	YEARS COMPLETED	COURSE/MAJOR	DEGREE
HIGH SCHOOL OR EQUIVILANCY				
COLLEGE, UNIVERSITY, TECH/OTHER				

EMPLOYMENT HISTORY- LIST LAST 2 (MOST RECENT) PAID OR VOLUNTEER POSITIONS:			
NAME/ADDRESS/BUSINESS OF EMPLOYER	IMMEDIATE SUPERVISOR	EMPLOYMENT DATES	TITLE DUTY DESCRIPTION

REFERENCES (NO FAMILY MEMBERS)			
NAME	ADDRESS	RELATIONSHIP	PHONE

**Incomplete applications will not be considered. All information is subject to verification**

NEW YORK STATE HUMAN RIGHTS LAW PROHIBITS EMPLOYMENT DISCRIMINATION DUE TO AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS OR CRIMINAL RECORD. ACCORDINGLY, CONTENT OF THIS APPLICATION SHOULD BE VIEWED AS EXPRESSING ANY LIMITATION, SPECIFICATION, OR DISCRIMINATION AS TO AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS, OR CRIMINAL RECORD AS RELATED TO EMPLOYMENT.

**YOU WILL BE REQUIRED TO ADHERE TO A DRUG SCREENING, CLEARANCE BY NY STATE DEPARTMENT OF CRIMINAL JUSTICE SEX OFFENDER REGISTRY IN ADDITION TO ADDITIONAL CRIMINAL AND EMPLOYMENT BACKGROUND CHECKS DEEMED APPLICABLE PER THE NY STATE COMPTROLLER'S OFFICE AS WELL AS THE WESTCHESTER COUNTY HEALTH DEPARTMENT AND/OR OPWDD.**

**I HAVE READ AND AM WILLING TO SUBJECT TO THE SCREENINGS INDICATED ABOVE.** \_\_\_\_\_

**APPLICANT'S SIGNATURE**

**If applicant is under the age of 18, parental name & signature is required:** \_\_\_\_\_

\_\_\_\_\_  
Parent/guardian Please Print

\_\_\_\_\_  
Parent/guardian signature

**AFFIRMATION:** I affirm that the statements made in this application (and attached documents) are true. (Withholding relevant information or supplying inaccurate information will result in your disqualification.)

**DATE:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_