

Recreation Department Use Only
Position:
Pay Rate:
Program:



CITY OF NEWTON
Seasonal Employment Application
Parks & Recreation Department Use Only
An Affirmative Action/Equal Opportunity Employer

EDUCATION RECORD

Name: (Last, First, MI)	Position Desired:	Date:
Address: (Street, City, State, Zip)		Social Security Number
Email:	Home Phone	Cell Phone
Do you have a valid Driver's License? Yes No If yes: Class: A B C D	Are you under the age of 18? Yes No If yes, Enter Date of Birth:	
Are you a U.S. Citizen? Yes No	If No do you have authorization to work in the U.S? Yes No	
Are you related to anyone employed by the City of Newton? Yes No		
Name:		Department:
Name:		Department:
In Case of Emergency Notify:		
Name, Address, Phone		

Please check one: <input type="checkbox"/> Full-time student <input type="checkbox"/> Part-time student <input type="checkbox"/> Not a student Date of return to school at the end of this current vacation period:	Please list name and address of school currently attending: Date/Year of Graduation _____	
High School/Vocational School (City, State, Zip)	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course
College (City, State, Zip)	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Field Degree
Please list any specialized licenses/certificates, special skills, etc....i.e. lifeguard/CPR Certifications, First Aide Certification, WSI Certification.		
1. _____ Expires: _____		
2. _____ Expires: _____		
Do you speak other languages: Yes No: Which Languages?		

EMPLOYMENT RECORD Please include volunteer positions.

In this top section, please list any previous employment with the City of Newton (Date, Position, Department):

Name: _____ Department: _____.

Name: _____ Department: _____.

Other Employment or Volunteer References:

Employer's Name	Dates Employed From: To:	Position	Salary
City, State, Zip			
Briefly describe your responsibilities			
Reason for leaving	Supervisor	Telephone	May we contact this employer? Yes No
Employer's Name	Dates Employed From: To:	Position	Salary
City, State, Zip			
Briefly describe your responsibilities:			
Reason for Leaving	Supervisor	Telephone	May we contact this employer? Yes No

READ CAREFULLY BEFORE SIGNING: I understand that permanent employment depends upon the result of satisfactory replies from my references, a favorable report of my physical examination, the completion of a probationary period and a Civil Service appointment if applicable. I hereby authorize the City to contact any of my previous employers or to contact schools, companies, credit bureaus, corporations, law enforcement agencies, persons and educational institutions to supply information concerning my background. I also hereby release any of the above from any liability and responsibility arising from their doing so.

I hereby also give my permission, as a condition of employment or a part of my duties relating to employment for the release of all appropriate background information regarding my credit history, criminal record history, driving history or other sources of information which is permissible by all governing laws pertaining to employment, insurance or credit history. I believe to the best of my knowledge that all information I have provided is accurate, true and correct and that I fully understand the terms of this release.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability. M.G.L. C.149 S. 19B

Date _____ Applicant's Signature _____.

Mail Completed Form to:
Newton Parks and Recreation – 246 Dudley Road – Newton, MA 02459
Please mark: Attn: Employment Application