

PLAYGROUND PROGRAM & YOUTH ACTIVITY CENTRES
2016 SUMMER JOB APPLICATION

**CITY OF MOOSE JAW
PARKS & RECREATION DEPARTMENT
4th FLOOR, 228 MAIN STREET NORTH
MOOSE JAW, SK S6H 3J8
PHONE # (306) 694-4447**

Play Leadership Workshop will be held **Saturday, May 14**
Homework Assignment received at time of registration.
Pre-register at the Kinsmen Sportsplex (855 MacDonald St. W).

Red Cross Standard First Aid & CPR Courses offered;
April 29, 30 & May 1 (weekend course) or **June 3-5** (weekend course)
*** must attend all 3 days of the course***
Pre-register at the Kinsmen Sportsplex (855 MacDonald St. W).

If hired **Mandatory Staff Orientation** will take place at the Kinsmen Sportsplex, on
Tuesday, June 28 for **Youth Activity Centre Staff** and **Monday, July 4** for
Playground Staff (Orientation will be a full day approx. 8:30am - 5:00pm).

POSITIONS:

Please check the position(s) you are applying for below:

Playground Coordinator

Youth Activity Centre Supervisor

Playground Director

Volunteer Playground Leader-In-Training

-This is a program for those lacking either experience or who are under 16 years of age who are prepared to do volunteer training. Successful participants of this program may be given employment preference in future years. Summer schedule and hours will be flexible.

[PLEASE PRINT CLEARLY IN BLUE OR BLACK INK]

This form is to be completed by the prospective positions listed above and returned to City of Moose Jaw, Parks & Recreation Department.

NAME _____
(First) (Middle) (Last)

ADDRESS _____
(No.) (Street) (City) (Province) (Postal Code)

TELEPHONE # _____
(Home) (Cell)

EMAIL _____ **SIN#** _____

BACKGROUND:

Have you ever been employed by the City of Moose Jaw _____ Year: _____

Are you over the age of 16 and under the age of 65 _____

Are you a student _____ (A student is someone currently enrolled in high school or post-secondary education in the process of completing a program of study)

Length of residence in Moose Jaw _____

School year now completing _____ School you're attending _____

On what date will you be available to start work? _____

If a student, on what date do you return to school? _____

On what date are you no longer available to work? _____

Do you have any relatives employed by the City of Moose Jaw? _____

If yes, their name and relationship to you _____

EDUCATION:

	NAME CITY/TOWN, PROVINCE	COURSE	LEVEL ATTAINED (please circle)	GRADUATE (YES / NO)
Elementary School			5 6 7 8	
High School			9 10 11 12	
College				
University				
Other				

WORK HISTORY:

DATE FROM:	DATE TO:	NAME & ADDRESS OF EMPLOYER	WAGE:	SUPERVISOR'S NAME & ADDRESS	REASON FOR LEAVING
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Describe the work you did.

DATE FROM:	DATE TO:	NAME & ADDRESS OF EMPLOYER	WAGE	SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
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Describe the work you did.

DATE FROM:	DATE TO:	NAME & ADDRESS OF EMPLOYER	WAGE	SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
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Describe the work you did.

May we contact the employers listed above? _____ If not, indicate below which one(s) you do not wish us to contact.

EXPERIENCE/TRAINING:

Have you successfully completed the Playground Leadership Workshop? _____

Year: _____ or Pre-registered for this year? _____

Have you worked or volunteered for the Parks & Rec. Dept. before? If so doing what?

Leadership Experience/Volunteer Involvement _____

Hobbies and Interests _____

Please list any special awards, qualifications or achievements you have achieved in the areas of recreation, sports, arts, cultural, outdoor education, etc.

Do you possess a current First Aid certificate? _____ Expiry Date: _____
(Please attach a copy of card or certificate.)

Do you possess a current CPR certificate? _____ Expiry date: _____
(Please attach a copy of card or certificate.)

What activities have you helped organize/supervise? _____

What clubs/organizations (including sports, drama, groups, etc.) do you/have you belonged to?

Please list any other personal skills which you believe would contribute to the position(s) you are applying for.

PERSONAL REFERENCES: (excluding individuals listed on page 3 and relatives)

NAME, OCCUPATION OR HOW YOU KNOW THEM	CITY/TOWN, PROV.	PHONE NUMBER
1)		
2)		
3)		

***Please feel free to attach a resume or any additional information you wish to provide.**

**PLEASE READ CAREFULLY
APPLICANT'S CERTIFICATION & AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

SIGNATURE _____ **DATE** _____