

## **APPLICATION FOR EMPLOYMENT**

re	cCenter	PERSONAL DATA	Λ.					
			4			NA <sup>1</sup> J. II.		
Last Name:		First:	Middle:					
						_		
Home Address			(If different from home address)					
Street			Street					
Oit.			City					
City				City				
Home Phone #			E-Mail Address					
Mobile Phone #								
Person to conta	ct in case Name:			Pho	one #:			
of an emergenc	y:							
	NT INFORMATION							
Position(s) apply								
What hours and	days can you work?							
Are you authoriz	ed to work in the United	States? □YES □NC	Are y	ou 18 y	ears of age or o	ver?	IYES □NO	
How were you re	eferred to us?							
EDUCATION	AND TRAINING							
Type of		chool & state	Grad	uated	Type of De	aree	Major/Minor	
School					Diploma/Cert		Field of Study	
High Cobool								
High School College or								
University								
Other								
Education								
EMPLOYME	NT EXPERIENCE	May we contact your p	present em	nlover?	YES □N	0		
		Dates Employed	Position				visor's Name	
Company Name		_ Month Year	Description of Duties			Cupo		
A -1-1								
Address:		From			Title			
Phone		To			Phone			
		_ Dates Employed	Position Title and			Supervisor's Name		
A delega		Month Year	Description of Duties					
Address:		From				Title		
Phone		To			Phone			
Company Name		_ Dates Employed	Position Title and		nd	Supervisor's Name		
		Month Year	Description of Duties					
Address:		From				Title		
Phone		To				Phone		

List any other employment experience that	is pertinent to the posi	ition you are applying:					
REFERENCES							
WORK REFERENCES (Those individuals Name Company Name Name	who can verify your pe	How do they know you? Phone How do they know you?					
Company Name		Phone					
Name Address Address Address		How do they know you? Phone How do they know you? Phone					
The Hempfield Area Recreation Commission qualified applicants on the basis of race, color veteran status.	(HARC) is an equal op , creed, religion, ancestry	<b>ENT – Please read carefully before signing.</b> opportunity employer and does not discriminate against otherwise $\alpha$ , age, sex, marital status, national origin, disability or handicap, or					
obligation for HARC to hire me. If I am hired,	I understand that either	other part of my consideration for employment establishes any HARC or I can terminate my employment at any time and for any I that no representative of HARC has the authority to make any					
has been concealed. I authorize HARC to c	contact references provid	omplete information on this application. No requested information ded for employment reference checks. If any information I have and that this will constitute cause for the denial of employment or					
Signature:	Signature: Date:						
Applications should be returned to the He Phone: (717) 898-3102. Visit us at www.her		on Commission, 950 Church Street, Landisville PA 17538. d us on Facebook.					
ACTIVITIES CHECKLIST							
Check those activities with which you are for credentials, i.e. First Aid, CPR, Lifesaving		ur expertise is in that field. Attach a copy of any certifications					
CERTIFICATIONS  □CPR □First Aid Other	SPORTS  □GroupExercise Instruct Other	 Craft					
AQUATICS  Crown Eversion Instructor	Other						
☐ Group Exercise Instructor ☐Lifeguard Instructor/trainer ☐Water Safety Instructor Other	OFFICE Other	•					
	Other	MUSIC					
RECREATION  □ Pre-Schoolers □ School age □Jr. High age □ Adults □ Seniors Other	OUTDOOR Activity Other	Other					
CLUBS Organization	Organization						
Organization	Organization						