

APPLICATION FOR EMPLOYMENT or VOLUNTEER SERVICE

Centre Region Parks & Recreation Authority

2040 Sandy Drive, Suite A, State College, PA 16803

(814) 231-3071 Fax: (814) 235-7832 www.crpr.org Email: crpr@crcog.net Updated: 01/2020

Please print or type all information. All statements regarding education, employment, references, etc., are subject to investigation and verification. A resume may be attached, but may not replace the information requested on this form.

DATE: _____

FULL NAME: _____

LAST FIRST MIDDLE

LOCAL ADDRESS: _____

STREET CITY STATE ZIP

PERMANENT ADDRESS: _____

STREET CITY STATE ZIP

PHONE NUMBER(S): () () _____

AREA CODE LOCAL PHONE AREA CODE PERMANENT PHONE

E-MAIL ADDRESS: _____

SOCIAL SECURITY NUMBER (Last 4 digits only): xxx-xx-_____

- Are you at least 18 years of age? Yes__ No__
- Are you legally able to work in the United States? Yes__ No__
- As part of the hiring process, several certificates specified in the “**CRPR Child Safety Policy**” at www.crpr.org will be required. Those documents should NOT be submitted with your application form; they will be requested when needed.
- Have you ever been convicted of a crime that is related to the specific position you are applying for? Yes__ No__
Depending on the charges, a Criminal Record may not necessarily exclude you from employment.
If yes, please explain: _____
- Drivers License Number: _____ State: ____ Do you have transportation? Yes__ No__
- How were you referred to Centre Region Parks and Recreation?
 Past/Present Employee Print Ad Friend Prior CRPR Employment Other _____

EMPLOYMENT DESIRED: _____ Salary/Wage
Desired: _____

• Can you perform the duties of the job you are applying for?
Yes__ No__ If no, please explain: _____

If additional space is required, please add a page.

- Are you employed now? Yes__ No__ • Date you can start: _____ • If seasonal, date you must finish: _____
- Will this be a second job? Yes__ No__ • Will you be available for scheduled weekend work? Yes__ No__ Some__

EDUCATION:

	SCHOOL NAME	CITY & STATE	# OF YEARS ATTENDED	MAJOR COURSES
HIGH SCHOOL				
COLLEGE				
OTHER				

MILITARY EXPERIENCE:

- Are you a Veteran? Yes__ No__ • If Yes: Branch of Service: _____
- Dates (mo./yr.) of Military Service (Active & Reserve): _____ • Dates of Active Duty: _____
- What type of education, training and work experience relevant to this job did you receive while in the military? _____

• List Military Awards: _____

CERTIFICATIONS *Note: Please bring certification cards to your interview(s) or attach copies to this application form.*

A.C.E./A.F.A.A./ H.F.I. Instructor		Water Aerobics Instructor		First Aid	
Water Safety Instructor		Lifeguarding		C.P.R.	
C.P.R. For Professional Rescuer		Lifeguard Instructor		Other:	

EMPLOYMENT EXPERIENCE:

Describe all previous work experience and duties performed. Begin with the most recent and work backward. If additional space is required, please add a page.

1. _____
NAME OF EMPLOYER ADDRESS TELEPHONE NUMBER

TYPE OF BUSINESS YOUR TITLE OR POSITION NAME/TITLE OF IMMEDIATE SUPERVISOR

Length of Employment: From Month ____ Year ____ To Month ____ Year ____ Total: Years ____ Months ____

Duties Performed: _____

Reason for Leaving _____ May we contact your present employer? Yes__ No__

2. _____
NAME OF EMPLOYER ADDRESS TELEPHONE NUMBER

TYPE OF BUSINESS YOUR TITLE OR POSITION NAME/TITLE OF IMMEDIATE SUPERVISOR

Length of Employment: From Month ____ Year ____ To Month ____ Year ____ Total: Years ____ Months ____

Duties Performed: _____

Reason for Leaving _____ May we contact this employer? Yes__ No__

List any additional skills or training that would qualify you for the position in which you are applying. If additional space is required, please attach an additional page. _____

REFERENCES:

List three (3) persons not related to you and not listed as previous employers. These references should be familiar with your background and character.

NAME	OCCUPATION	POSTAL ADDRESS	TELEPHONE NO.
		Email:	
		Email:	
		Email:	

List any relatives or friends currently employed by the Centre Region Parks & Recreation Authority or the Centre Region Council of Governments: _____

Applicant Comments:

- *I certify that the statements made by me on this application are true, complete, and correct to the best of my knowledge.*
- *I understand that if I knowingly make any misrepresentation, I am subject to disqualification and/or dismissal.*
- *I understand that my employment / service must comply with the provisions of the "CRPR Child Safety Policy."*

SIGNATURE (Required for consideration)

DATE