

TOWN OF CORTLANDT DEPARTMENT OF RECREATION AND CONSERVATION

***EMPLOYMENT APPLICATION - Please Fill in Completely**

Last Name		First Name		Initial		Age		Date of Birth		Date Available	
Address		City		ZIP		Male <input type="checkbox"/> Female <input type="checkbox"/>		Phone No.			
EDUCATION (Name and Location of School)											
High School		DATES ATTENDED		DATE GRADUATED		DEGREE		COMMENTS			
College											
Military/Other											
Other											
EMPLOYMENT HISTORY											
From To		Employer		Address		Supervisor		Phone		REF. Sent Rec'd	
From To		Employer		Address		Supervisor		Phone		REF. Sent Rec'd	
PERSONAL REFERENCES (Fill in Completely)											
Name		Address		Phone		REF. Sent Rec'd					
Name		Address		Phone		REF. Sent Rec'd					
Have you ever been convicted of a crime? Yes <input type="checkbox"/> No <input type="checkbox"/>											
CERTIFICATIONS											
✓ Expiration Date		✓ Expiration Date		OTHER CERTIFICATIONS		RECREATION EXPERIENCE		List: Sports, hobbies, special interests, extra-curricular activities, certifications.			
CPO		CPR									
LGT		1 st Aid/RTE									
WSI		Waterfront									
Positions applied for in order of preference:											
1.		2.		3.							
Applicant's Signature: _____ Date _____ Interviewed by: _____ Date _____											
Recommended for employment		Yes <input type="checkbox"/> No <input type="checkbox"/>		Title		Location		Salary		Dates	
Practical Exam				Comment							