

Play S.A.F.E. 2019

City of New Brunswick
Division of Youth Services

ALL Applications Due On or Before May 31, 2019

For office use only:

Date received

All Documents

Fingerprint

NAME:			
ADDRESS:			
CITY/STATE:		ZIP CODE:	
DAY PHONE:		EVENING PHONE:	
CELL PHONE:		EMAIL:	
ARE YOU 18 YEARS OR OLDER?		YES/NO	
CIRCLE HIGHEST GRADE COMPLETED			
HIGH SCHOOL:	10	11	12
COLLEGE:	1	2	3 4
GRADUATE SCHOOL:	1	2	MORE
DRIVER'S LICENSE YES/NO		STATE:	LICENSE NO.:
POSITION APPLYING FOR:			
JUNIOR COUNSELOR	SENIOR COUNSELOR	RECREATION ASSISTANT	
GROUP LEADER	COORDINATOR	INSTRUCTOR	
DRIVER:		OTHER:	
CERTIFICATIONS:			
CPR	FIRST AID	WATER SAFETY	AEROBICS
TEACHER (GRADE/SPECIALTY)			
BI-LINGUAL EDUCATION	OTHER		
LANGUAGES SPOKEN: ENGLISH SPANISH FRENCH OTHER: _____			
ANY PHYSICAL LIMITATIONS? YES/NO			
EXPERIENCE WORKING WITH CHILDREN: (PLEASE CIRCLE ALL THAT APPLY)			
ARTS & CRAFTS	HOMEWORK	SPORTS (WHICH):	
ARTS / DANCE / DRAMA MUSIC	COACHING	MENTORING/COUNSELING	
ACADEMIC (READING/MATH/SCIENCE/ ENVIRONMENTAL)	YMCA/YWCA GIRLS & BOYS CLUBS PRAB	CATHOLIC CHARITIES SALVATION ARMY CIVIC LEAGUE	
NEW BRUNSWICK SCHOOLS		OTHER SUMMER CAMPS	

NOTE ANY SPECIAL QUALIFICATIONS HERE, INCLUDING PREVIOUS SUMMER CAMP WORK (DO NOT LEAVE BLANK):

WORK AVAILABILITY:

MONDAY – FRIDAY	MONDAY	TUESDAY
WEDNESDAY	THURSDAY	FRIDAY

TIMES AVAILABLE:

10:00AM – 4:00PM	MORNINGS ONLY	AFTERNOONS ONLY	OTHER:
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HAVE YOU EVER BEEN EMPLOYED BY THE NEW BRUNSWICK SCHOOLS?	YES/NO
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HAVE YOU EVER BEEN EMPLOYED BY THE CITY OF NEW BRUNSWICK?	YES/NO
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IF SO, WHEN?

WHICH DEPARTMENTS?

LIST THE NAMES OF ANY RELATIVES EMPLOYED BY THE CITY OF NEW BRUNSWICK:

HAVE YOU BEEN FINGERPRINTED FOR THE YOUTH SERVICES SYSTEM OR PLAY SAFE?

YES/NO

HAVE YOU EVER BEEN ARRESTED?	YES/NO
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HAVE YOU EVER BEEN CONVICTED OF A CRIME?	YES/NO
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IF YES, WHAT WAS THE CONVICTION FOR?

SIGNATURE: _____	DATE: _____
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PLEASE RETURN TO:	IVAN ADORNO YOUTH SERVICES SYSTEM P. O. BOX 269 NEW BRUNSWICK, NJ 08903
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