

## Williston Recreation & Parks

7900 Williston Road, Williston, VT 05495 Phone: (802) 876-1160 Email: recreation@willistonvt.org

## **Employment Application**

|  | nation:  |  |                                      | DATE      | OF APPLIC                                       | ATION:                        |                                |         |
|--|--|--|--------------------------------------|-----------|---|-------------------------------|--------------------------------|---------|
| Last Name: Firs  |  |  | First N                              | Name:     |   |                               |                                | MI      |
| Primary Phone Nu   | ımber:   |  | E-mai                                | il Addres | s:  |                               |                                |         |
| Current Address Street:  |  | When?  |                                      | Perma     |   |                               |                                |         |
|  |  | State:   |                                      |           |   |                               |                                |         |
| <b>Employment Des</b>  | sired:   | 1st Choice:  |                                      |           | 2 <sup>nd</sup>                                 | Choice:                       |                                |         |
| Dates of Availability: From  |  |  |                                      |           |   |                               |                                |         |
| Have you   | worked for t   | the Town of Willis   | ton before?                          | YES       | NO  | If Yes                        | , for which dept?              |         |
| How did you hear   | -  |  | • •                                  |           |   | Othon                         |                                |         |
| New  | spaper   | Website  | walk-iii                             |           | _r riena  | Other                         |                                |         |
| Education:   |  |  |                                      |           |   |                               |                                |         |
| If currently in school- (Circle your present year in   |  |  | ŕ                                    | _         | chool- 1 2                                      |                               | College- 1 2                   |         |
| W. I. G. I. I.   | Schoo  | ol Name, City, Stat  | te                                   |           | ourse Study/                                    | Major                         | Degree Re                      | eceived |
| High School  |  |  |                                      |           |   |                               |                                |         |
| College  |  |  |                                      |           |   |                               |                                |         |
| Other  |  |  |                                      |           |   |                               |                                |         |
| Certifications: (L   | ist relative co  | ertifications that yo  | ou hold)                             |           |   |                               |                                |         |
| Employment: (Li  |  |  |                                      |           |   |                               | your work exper                |         |
|  | •  | -  | •                                    | 1 2000001 |   |                               | your worm emper                |         |
| May we contact   | this employ  | er? YES  | S NO                                 |           |   |                               |                                |         |
|  |  | ver?YE   |                                      |           | Employed I                                      | From                          | To                             |         |
| Company  | Name:  |  |                                      |           |   |                               |                                |         |
| Company Name and   | Name:<br>Title of Imm  |  |                                      |           |   | Phone                         | :                              |         |
| Company Name and Your Title  | Name:  | ediate Supervisor: _   | _ Reason for Leav                    | ving:     |   | Phone                         | :                              |         |
| Name and Your Title Description  | Name: Title of Imme  | ediate Supervisor:ibilities:   | Reason for Leav                      | ving:     |   | Phone                         | :                              |         |
| Company Name and Your Title Description Volunteer Exper  | Name: Title of Immediate of Responsi   | ediate Supervisor:ibilities:   | _ Reason for Leav                    | ving:     | If None, Ch                                     | Phone                         | :                              |         |
| Company Name and Your Title Description Volunteer Exper Organizati   | Name: Title of Immen of Responsitience: (List you now Name:  | ediate Supervisor:ibilities:   | _ Reason for Leav                    | ving:     | If None, Ch                                     | Phone                         | :<br>To                        |         |
| Company Name and Your Title Description Volunteer Exper Organizati Description                                     | Name: Title of Immen of Response ience: (List you not Response) on Name: n of Response   | ediate Supervisor: ibilities: ibilities:                                 | _ Reason for Leav                    | ving:     | If None, Ch                                     | Phone                         | :To                            |         |
| Company Name and Your Title Description Volunteer Exper Organizati Description Personal Referen                    | Name: Title of Immen of Responsion Name: n of Responsion of Responsion CE: (List two   | ediate Supervisor: ibilities: ibilities: o individuals, not r            | Reason for Leavolunteer experience   | ving:     | If None, Ch<br>From<br>vide a charac            | Phone                         | To                             |         |
| Company Name and Your Title Description Volunteer Exper Organizati Description Personal Referer Name:              | Name: Title of Immediate of Responsion Name: n of Responsion | ediate Supervisor: ibilities: ibilities: ibilities: o individuals, not r | Reason for Leavelolunteer experience | ving:     | If None, Ch From  vide a charac  Phone:         | Phone eck Here: ter reference | To                             |         |
| Company Name and Your Title Description  Volunteer Exper Organizati Description  Personal Referer Name: Relationsh | Name: Title of Immen of Responsion Name: n of Responsion of  | ediate Supervisor: ibilities: ibilities: o individuals, not r            | Reason for Leavelolunteer experience | ving:     | If None, Ch From  vide a charac Phone: How many | Phone eck Here: ter reference | To  for you)  ney known you? _ |         |

## **Requirements for Employment:** All potential employees must meet the following minimum requirements.

- Must be 16 years of age or older at the time of employment.
- Must complete releases for background checks.
- Employment offer is conditional based on the results of number 2 above.
- Successful completion of or certification in areas that are required by the position.
- More specific requirements may be necessary for a position; these will be discussed at the interview.

## **Applicant's Waiver/Release:**

I acknowledge that the information that I have provided on this application, to the best of my knowledge, is the absolute truth. I further acknowledge that if any information herein is determined to be untrue, misleading, or omitted it will result in immediate dismissal, regardless of the time of discovery by the Williston Recreation & Parks Department. I authorize the investigation of all statements herein and release the Williston Recreation & Parks Department and all others from liability in connection with same.

I acknowledge that by signing this form I agree to abide by the Williston Recreation & Parks Department's philosophy, and I further agree to do my best to provide the participants in the programs or activities that I work a FUN, FAIR, POSITIVE, and MEANINGFUL experience.

I hereby authorize the Williston Recreation & Parks Department to make a thorough investigation of my past employment and activities. I release from all liability the Williston Recreation & Parks Department, former employers, or any persons supplying such information.

| Applicant's Signature:                               | Date:   |
|--|---|
| If you are under 18 years of age a parent or guardia | n must fill out and sign below:   |
| Parent/Guardian's Permission:                        |   |
| Parent's Name:                                       | Phone:  |
| I have read the Employment Application of my chil    | d and hereby give permission for him/her to work for the Williston sion for my child to have background checks completed on them, if they are |
| Parent/Guardian Signature:                           | Date:   |
|  | March 2025  |

**Cover Letter** Resume