

## 2023 SUMMER EMPLOYMENT APPLICATION

PERSONAL INFORMATION						
Last Name	First Name	Middle Initial	Pronouns:			
Address						
City/Town	Postal Code					
Telephone (home)	(cell)	Email				
Date of Birth	(month)					
In order to be an employee of Goulds Recreation Association, you need a social insurance number. Do you currently have a social insurance number?  Yes No In the process of getting one **a person cannot be hired without a social insurance number**						
POSITION(S) APPLIED FOR (all positions may not be available; check all you are interested in)						
□Day Camp Head Counselor □Sports Head Counselor □Programming Head Counselor □Inclusion Counselor □Kids at Play Counselor □Sports Counselor: □ Tennis □ Outdoor Basketball □Day Camp Counselor □Sports Counselor: □ Softball □ *Soccer						
CERTIFICATIONS						
1. Have you ever been employed with Goulds Recreation? ☐ Yes ☐ No 2. Have you ever volunteered with Goulds Recreation? ☐ Yes ☐ No 3. Do you have Standard First Aid? ☐ Yes (expiry date:) ☐ No 4. Do you have CPR LEVEL C? ☐ Yes (expiry date:) ☐ No 5. Do you have AED certification? ☐ Yes (expiry date:) ☐ No 6. Do you have High Five Principles of Healthy Child Development completed? ☐ Yes ☐ No 7. Please list any other certification you may have that could benefit you working with Goulds Recreation:						
EDUCATION						
Are you currently enrolled in Secondary or Post-Secondary Education?   Yes   No  If currently enrolled in High School, what grade level will you complete this year?						
<b>Educational Institute</b>	Program of Study	# of years at institute	Anticipated completion date			

WORK EXPERIENCE (attach letters of reference from previous employers if available)					
	Previous Employer	<b>Date Employed</b>	Position/Responsibilities		
EX	PERIENCE/TRAINING				
Ind	icate/elaborate on any experience	e working/volunteerin	g or education/training in the following areas:		
	Youth ages 13-16 years				
	☐ Working with persons with a disability or special needs				
	worming with persons with a c	22 Special 1100			
	Knowledge of Child Developm	nent			
	Behavior management				
	Benavior management				
	Supervising/evaluating staff, le	eadership			
	Planning and coordinating chil	dren's programs			
	Training and coordinating citi	dren's programs			
	Other relevant experience/train	ning			

<b>REFERENCES:</b> Employment related, volunteer work related or educator references are preferred. <i>Do NOT list relatives, friends or current Goulds Recreation Board Members as references</i> .						
I hereby authorize Goulds Recreation application and/or my resume for the personnel file. The following individuals	e purpose of obtaining reference int	formation, including contents of my				
Name of Reference	How do you know this reference?	Contact Information for Reference (home #, work # and email)				
For employment reference, may we	approach: Your present employee Your former employee					
CHECK LIST: check each item if it is enclosed with application. Resume is required with application.						
☐ Current resume ☐ 2023 RNC Certificate of Conduct with Vulnerable Sector Check or dated receipt of application						
<ul> <li>Attach a photocopy of the following if completed and current:</li> <li>□ First Aid Certificate</li> <li>□ CPR (level C) and AED Certificate</li> <li>□ High Five Certification (Principles of Healthy Child Development and/or High Five Sport)</li> <li>□ Any other certification</li> </ul>						
DECLARATION (to be signed by the applicant – read carefully before signing)						
I acknowledge that employment and continuing employment are conditional upon observance of the rules, regulations and instructions governing employment by Goulds Recreation Association as in effect at the time of employment, or established at any subsequent time.						
I am available for the period of employment indicated in the job description of the positions for which I have applied.						
I understand that positions require pl	hysical agility, constant mobility, li	ifting and comfort in aquatic settings.				
It is understood and agreed that the information given on this application is true to the best of my knowledge, and any misrepresentation made by me may be sufficient cause for immediate dismissal.						
I understand that only those with their Application AND Resume handed in before the closing date will be considered for an interview and only those granted interviews will be contacted.						
Applicant's Signature: Date (yyyy-mm-dd):						

Please send completed application and resume to one of the following methods (Deadline date is  $5:30 \, \mathrm{pm}$ , Friday, April  $28^{th}$ , 2023):

## PUT ALL APPLICATIONS/RESUMES TO THE ATTENTION OF NICOLE CHAFE

- Goulds Recreation, P.O box 40, Goulds, NL, A1S 1G3
- Email to: gouldsrecreation@gmail.com
- Drop-off to Goulds Rec Centre

\*\*If there are any questions about the application process, *APPLICANTS* are encouraged to contact Nicole by email <u>gouldsrecreation@gmail.com</u> or by phone 745-7575.