

2025 SUMMER EMPLOYMENT APPLICATION

PERSONAL INFORMATION										
Last Name	First Name	Middle Initial	Pronouns:							
Address										
City/Town	Postal Code									
Telephone (home)	ome) (cell) Email									
Date of Birth										
Date of Birth (year) (month) (day) 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 □ Sports Counselor □ Sports Counselor □ Sports Counselor □ Softball □ Soccer □ Soccer □ Softball □ Soccer □ Soccer □ Softball □ Soccer □ S										
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 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?										
Educational Institute	Program of Study	# of years at institute	Anticipated completion date							

WORK EXPERIENCE (attach letters of reference from previous employers if available)										
	Previous Employer	Date Employed	Position/Responsibilities							
		+								
EXPERIENCE/TRAINING										
Ind	licate/elaborate on any experience	ce working/volunteering	g or education/training in the following areas:							
	Children aged 3-12 years									
	Youth ages 13-16 years									
	Working with persons with a co	lisability, special needs	, neurodiverse families							
	C	7								
	Knowledge of Child Developm	nent								
	Behavior management									
	Supervising/evaluating staff, le	eadership								
	Planning and coordinating chil	ldren's programs								
		- F 8								
	Other relevant experience/train	ning								

REFERENCES: Employment relate list relatives, friends or current Gou					are pref	erred. I	Do NOT	
I hereby authorize Goulds Recreation application and/or my resume for the personnel file. The following individuals	e purpose of o	btaining referenc	e information	n, incl				
Name of Reference		o you know this reference?		Contact Information for Reference (home #, work # and email)				
For employment reference, may we a	approach:	Your present e	- •	0	Yes Yes	0	No No	
CHECK LIST: check each item if i	t is enclosed	with application.	Resume is re	equired	d with a	pplicati	ion.	
☐ Current resume ☐ 2025 RNC Certificate of Conduct with Vulnerable Sector Check or dated receipt of application Attach a photocopy of the following if completed and current:								
First Aid Certificate CPR (level C) and AED Certificate High Five Certification (Principles of Healthy Child Development and/or High Five Sport) Any other certification								
DECLARATION (to be signed by	the applican	t – read carefull	y before sign	ning)				
I acknowledge that employment and regulations and instructions governing employment, or established at any	ng employmer	nt by Goulds Rec						
I am available for the period of emplapplied.	oyment indic	ated in the job de	scription of t	he pos	itions fo	or whicl	h I have	
I understand that positions require pl	nysical agility	, constant mobili	ty, lifting and	d comf	ort in ac	uatic s	ettings.	
It is understood and agreed that the in and any misrepresentation made by r	_					my kno	owledge,	
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 5pm, Friday, May 2nd, 2025):

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 gouldsrecreation@gmail.com or by phone 745-7575.