

Dear Applicant,

Thank you for your interest in a position with the East Windsor Recreation Department 2023 Summer Camp Program. Please carefully read below for information pertaining to the application and interview process.

□ **All applications are due ASAP; please submit electronically no later than April 14, 2023. The earlier you submit your COMPLETED application, the better! Please return COMPLETED applications to [summercampewt@gmail.com](mailto:summercampewt@gmail.com) and also copy to [recreationassistant@east-windsor.nj.us](mailto:recreationassistant@east-windsor.nj.us)** Applications will be online on the township website, [www.east-windsor.nj.us](http://www.east-windsor.nj.us), or in person in the Municipal Building foyer.

- Age requirements are as follows:
  - Counselor – 16 years old
- Please be mindful that these positions are for the **entire** 8-week program, including Camp Orientation and assistance at one (1) Recreation Event in the evening or on a weekend.
  - Two half day or evening trainings will be held prior to the start of camp. Dates are **To Be Determined**.
  - Camp will begin on Monday, June 26, 2023 and continue through Friday, August 18, 2023. There will be no camp on Monday or Tuesday, July 3 & 4, 2023.
  - Recreation Department special events may tentatively take place on evenings or weekends throughout the summer months. Each camp staff member is **required** to work at least one (1) of these events, as per each staff contract. Event assignments will take place at orientation.
- ALL staff will be **required** to be CPR/AED certified. It is recommended that you plan early to get your certification through courses available online. If certified (must not expire during the summer), please provide proof along with your application.
- **Full Vaccination (including Booster) for the COVID – 19 virus is strongly recommended.**
- Applicants who meet our criteria for potential summer employment will be contacted by phone or email to schedule an interview shortly after receipt. Applications will be accepted until openings are filled.

If you have any additional questions, please email [recreation@east-windsor.nj.us](mailto:recreation@east-windsor.nj.us) or contact the Recreation Department at 609-443-4000, extension 225.

Thank you for your interest!

*Joyce W. Ferejohn, Director of Recreation*

# EAST WINDSOR TOWNSHIP RECREATION DEPARTMENT

## SUMMER CAMP EMPLOYMENT APPLICATION

Please type or print all information.

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*LAST FIRST MIDDLE INITIAL MM DD YYYY*

ADDRESS \_\_\_\_\_  
*STREET CITY STATE ZIP*

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL ADDRESS (PLEASE PRINT) \_\_\_\_\_

### POSITION APPLYING FOR

*PLEASE CIRCLE ALL THAT APPLY*

<b>FULL TIME:</b>	Program Supervisor	Assistant Supervisor	Counselor
	Afternoon Care Supervisor (2:45pm – 6:00PM)	Morning Care Supervisor (6:45 am-8:45am)	

Full Vaccination for the COVID – 19 virus is strongly recommended. Please indicate your status:

\_\_\_\_ Not Vaccinated \_\_\_\_ Fully Vaccinated—If so, Dates: \_\_\_\_\_ Please attach vaccination record.

Additional notes regarding current status: \_\_\_\_\_

Please list any previous Township employment (position and dates): \_\_\_\_\_

\_\_\_\_\_

Please list any certifications/licenses (CDL, First Aid, CPR, AED, Epi-Pen, etc.) that you currently possess AND will be current through 8/18/23: \_\_\_\_\_

\_\_\_\_\_

In a short paragraph, please tell us something about yourself and why you wish to work for the East Windsor Recreation Department: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### REFERENCES

NAME	TITLE/POSITION	ADDRESS	TELEPHONE NUMBER
1.			
2.			
3.			

### EDUCATION

	NAME/ADDRESS	DATES ATTENDED	DEGREE	MAJOR/CERT.
HIGH SCHOOL				
COLLEGE/UNIVERSITY				
OTHER (PLEASE SPECIFY)				

**PLEASE ATTACH A RESUME AND/OR LISTING OF PREVIOUS WORK EXPERIENCES. PLEASE INCLUDE THE NAME OF THE ORGANIZATION, SUPERVISOR, ADDRESS, PHONE NUMBER, JOB TITLE, RESPONSIBILITIES, AND OTHER PERTINENT INFORMATION.**

*I HEREBY AUTHORIZE the release of the information listed herein concerning me to the Township of East Windsor and absolve the Township of East Windsor from liability for use of same. I HEREBY DECLARE the information provided to me to be true, correct, and complete. In addition, I authorize the Township of East Windsor to obtain background information concerning my driving and personal record and release the Township of East Windsor from any liability regarding the use of this information. I do this willingly, knowingly, and as a volunteer act.*

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

DATE \_\_\_\_\_

(if applicant is under the age of 18)