

Application for TLC Advisor



Town of Beekman Recreation & Parks
29 Recreation Center Road, Hopewell Junction, NY 12533
845-227-5783 845-227-9685F

recdirector@townofbeekmanny.us www.townofbeekman.com



PRINT CLEARLY

Last Name First Name Middle Initial Email that you **check DAILY!**

Home Phone Cell Phone Cell Provider

Street # Street name Town Zip

Describe any leadership experiences you have had: _____

Describe any work you have done with teens: _____

Please describe any interests or skills that you could share with teen members: _____

Education

College Name Dates Attended Major

High School Name Dates Attended Major

Check off any certifications, licenses and trainings (Please enclose a copy):

_____ Project Adventure _____ First Aid _____ CPR _____
Type Exp Date Exp Date

Work History: list most recent job first

Firm Name for most recent job Address

Job Title Employment Dates Supervisor Supervisor's Contact Info

Description of Duties

Firm Name for next job Address

Job Title Employment Dates Supervisor Supervisor's Contact Info

Description of Duties

Firm Name for job #3 Address

Job Title Employment Dates Supervisor Supervisor's Contact Info

Description of Duties

Add any others on separate paper

Please turn OVER to complete the back and sign

List 3 non-relatives and non-peers who can attest to your character, work ethic and ability to do the type of work you are applying to perform.

Reference 1:

Printed Last Name	Printed First Name	Position/Title		
Cell phone	Work phone	Home land line		
email address	Street address	Town	State	Zip

Reference 2:

Printed Last Name	Printed First Name	Position/Title		
Cell phone	Work phone	Home land line		
email address	Street address	Town	State	Zip

Reference 3:

Printed Last Name	Printed First Name	Position/Title		
Cell phone	Work phone	Home land line		
email address	Street address	Town	State	Zip

By signing below:

- I certify that the statements made on submitted materials are true and correct to the best of my knowledge.
- I understand that any misinformation, falsification or failure to disclose pertinent information will result in the termination of my services.
- I authorize all present or prior employers, educational institutions and the individuals listed by me, to release to Beekman Recreation, any information relevant to my application, including information about my employment record, and hereby release them from liability and responsibility for doing so.
- I understand that Beekman Rec reserves the right to conduct a criminal background check.
- If hired I agree to consent to random blood and alcohol testing and that failure to submit to such testing immediately shall be grounds for dismissal.
- I understand that any offer of employment is contingent upon:
 - My supplying documentation to substantiate my identity and employment eligibility sufficient to complete the I-9 Form required by the Federal Immigration and Control Reform Act of 1986
 - My scheduling, paying for, and partaking in, a drug test at TEK Occupational Services, Inc., 1075 Rte. 82, Hopewell Junction within 3 days of being asked.
 - I understand that Town of Beekman will reimburse me for the \$40 fee if I pass the test, accept the position, attend all training, and remain available to work all the dates agreed upon.

Applicant Signature

Date