



# Conejo Recreation & Park District

## APPLICATION FOR 2020 SUMMER DAY CAMP POSITION

Summer Day Camp positions available at:

Little Folks Camp (Ages 4-7)    Wildwood Camp (Ages 6-12)    Thousand Oaks Camp (Ages 5-10)    Newbury Park Camp (Ages 5-10)

**Mark Position(s) Applying For:**                      Camp Counselor \$13.30-\$14.40/hr                      Custodian \$13.70-\$15.30/hr  
*Hours range up to 40+ hours per week*                      Senior Counselor \$14.50-\$16.15/hr                      Camp Director \$15.50-\$17.25/hr

**Return completed application to Conejo Center/Outdoor Unit** *(call to verify receipt)*

1175 Hendrix Avenue, Thousand Oaks, CA 91360                      aakers@crpd.org                      805-495-2163

### PERSONAL INFORMATION

|  |            |                            |      |
|--|------------|----------------------------|------|
| NAME   |            | SOCIAL SEC. NO. (optional) |      |
| CURRENT ADDRESS  | CITY       | STATE                      | ZIP  |
| HOME PHONE   | CELL PHONE |                            |      |
| EMAIL ADDRESS  |            |                            |      |
| DRIVER'S LICENSE NO.   | STATE      | EXPIRES                    | TYPE |
| DO YOU HAVE ANY RELATIVES WORKING FOR CONEJO RECREATION AND PARK DISTRICT? |            | YES                        | NO   |
| IF YES, NAME:  |            | WHICH DIVISION?            |      |

### EDUCATION AND TRAINING

| HIGH SCHOOL GRADUATE / GED CERTIFICATE?                               | YES             | NO | IF NO, HIGHEST GRADE COMPLETED AS OF JUNE 2020: |                         |
|---|-----------------|----|---|-------------------------|
| COLLEGE, BUSINESS OR TRADE SCHOOLS ATTENDED<br>Name & Location (City) | COURSE OF STUDY |    | CREDIT COMPLETED                                | DEGREE                  |
|   | Major           |    | # Credits _____                                 | Yes    No<br>Type _____ |
|   | Major           |    | # Credits _____                                 | Yes    No<br>Type _____ |
|   | Major           |    | # Credits _____                                 | Yes    No<br>Type _____ |

### ADDITIONAL INFORMATION

PROFESSIONAL TRAINING, CONFERENCES AND WORKSHOPS ATTENDED RELATED TO THE POSITION *(use separate sheet if necessary).*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PROFESSIONAL OR TRADE LICENSE, CERTIFICATES OR REGISTRATIONS:

TYPE: \_\_\_\_\_ LICENSE NO.: \_\_\_\_\_ STATE: \_\_\_\_\_ EFFECTIVE DATE: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**A RESUME WILL NOT SUBSTITUTE FOR THIS SECTION**

**EMPLOYMENT HISTORY**

LIST ALL PERIODS OF EMPLOYMENT FOR THE LAST TEN YEARS, BEGINNING WITH THE MOST RECENT. INCLUDE VOLUNTEER, MILITARY, OR OTHER SPECIAL EXPERIENCE IF APPLICABLE (*attach additional sheets as necessary*).

|                    |     |  |           |                 |
|--------------------|-----|--|-----------|-----------------|
| EMPLOYER           |     |  | JOB TITLE |                 |
| ADDRESS            | Mo  | FROM<br>Yr   | Mo        |                 |
| CITY               |     | TO<br>Yr   | DUTIES    |                 |
| STATE              | ZIP | FULL TIME<br>PART TIME<br>VOLUNTEER<br>HOURS<br>WORKED/VOLUNTEERED<br>PER WEEK _____ |           |                 |
| TELEPHONE          |     |  |           |                 |
| SUPERVISOR         |     |  |           |                 |
| REASON FOR LEAVING |     |  |           | MAY WE CONTACT? |

|                    |     |  |           |                 |
|--------------------|-----|--|-----------|-----------------|
| EMPLOYER           |     |  | JOB TITLE |                 |
| ADDRESS            | Mo  | FROM<br>Yr   | Mo        |                 |
| CITY               |     | TO<br>Yr   | DUTIES    |                 |
| STATE              | ZIP | FULL TIME<br>PART TIME<br>VOLUNTEER<br>HOURS<br>WORKED/VOLUNTEERED<br>PER WEEK _____ |           |                 |
| TELEPHONE          |     |  |           |                 |
| SUPERVISOR         |     |  |           |                 |
| REASON FOR LEAVING |     |  |           | MAY WE CONTACT? |

|                    |     |  |           |                 |
|--------------------|-----|--|-----------|-----------------|
| EMPLOYER           |     |  | JOB TITLE |                 |
| ADDRESS            | Mo  | FROM<br>Yr   | Mo        |                 |
| CITY               |     | TO<br>Yr   | DUTIES    |                 |
| STATE              | ZIP | FULL TIME<br>PART TIME<br>VOLUNTEER<br>HOURS<br>WORKED/VOLUNTEERED<br>PER WEEK _____ |           |                 |
| TELEPHONE          |     |  |           |                 |
| SUPERVISOR         |     |  |           |                 |
| REASON FOR LEAVING |     |  |           | MAY WE CONTACT? |

|                    |     |  |           |                 |
|--------------------|-----|--|-----------|-----------------|
| EMPLOYER           |     |  | JOB TITLE |                 |
| ADDRESS            | Mo  | FROM<br>Yr   | Mo        |                 |
| CITY               |     | TO<br>Yr   | DUTIES    |                 |
| STATE              | ZIP | FULL TIME<br>PART TIME<br>VOLUNTEER<br>HOURS<br>WORKED/VOLUNTEERED<br>PER WEEK _____ |           |                 |
| TELEPHONE          |     |  |           |                 |
| SUPERVISOR         |     |  |           |                 |
| REASON FOR LEAVING |     |  |           | MAY WE CONTACT? |

**CERTIFICATION OF APPLICANT**

I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE, AND THAT ANY MISSTATEMENT OF MATERIAL FACTS MAY DISQUALIFY ME FROM FURTHER CONSIDERATION OR RESULT IN TERMINATION OF THE CONTRACT IN THE EVENT THE CONEJO RECREATION AND PARK DISTRICT CONTRACTS FOR MY SERVICES. ALL STATEMENTS ARE SUBJECT TO VERIFICATION.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_