



Village of
Little Chute

108 W. Main Street, Little Chute, WI 54140

PARKS, RECREATION & FORESTRY DEPARTMENT 2016 SEASONAL PART-TIME APPLICATION

If you have any questions, please feel free to call the Parks, Recreation & Forestry Department at 423-3869.

PERSONAL DATA	Name:			Cell Phone Number
	Last	First	Middle	- -
	Address:			Home Phone Number
	House#	Street	City	Zip Code
	Do you possess a valid Wisconsin driver's license? No Yes License#: _____			
	If you are less than 18 years of age, please indicate date of birth: _____			
If you are less than 18 years of age, can you provide required proof of your eligibility to work? No Yes				
Have you ever been convicted of a felony or do you currently have a felony charge pending? No Yes If yes, please attach a separate sheet giving full information.				

EDUCATION	<i>If you are currently attending high school, please list name and location of school.</i>	
	Name of High School:	Location:
	Did you graduate from high school or do you possess a GED? No Yes	
	<i>If you are currently attending college/university/techschool, please list name and location of school.</i>	
	Name of College/University/TechSchool:	Location:
<i>If you are currently attending college/university/techschool, please list field of study.</i>		
Field of Study at College/University/TechSchool:		

SEASONAL PART-TIME JOBS	Please check position(s) you are applying for.		* applicant must be at least 15 years old by May 15th ** prefer applicant to be 16 years old by summer *** prefer applicant to be 18 years old by summer
	<input type="checkbox"/> Parks/Forestry Laborer ***	<input type="checkbox"/> Recreation Instructor (tot lot & sports) **	
	<input type="checkbox"/> Softball Scorer	<input type="checkbox"/> Pool Cashier (admission & concessions) *	
	<input type="checkbox"/> Lifeguard with WSI	<input type="checkbox"/> Lifeguard	
	Lifeguard/First Aid Certification Expiration Date: _____	Lifeguard/First Aid Certification Expiration Date: _____	
	CPR Certification Expiration Date: _____	CPR Certification Expiration Date: _____	
WSI Certification Expiration Date: _____			

WORK EXPERIENCE	Name of Employer		From Month/Year	To Month/Year
	Employer's Address		Employer's Phone Number	Immediate Supervisor
	Job Title	Duties Performed		
	Reason For Leaving		Ending Wage/Salary	
	Name of Employer		From Month/Year	To Month/Year
	Employer's Address		Employer's Phone Number	Immediate Supervisor
	Job Title	Duties Performed		
	Reason For Leaving		Ending Wage/Salary	

OTHER INFORMATION	<p>Please list any experience, skills, or qualifications that we should consider as part of your application for employment:</p>
-------------------	---

REFERENCES (do not include relatives)	Name	Position/Title/Profession	Telephone Number
	Address		How many years have they known you?
	Name	Position/Title/Profession	Telephone Number
	Address		How many years have they known you?
	Name	Position/Title/Profession	Telephone Number
	Address		How many years have they known you?

AUTHORIZATION AND WAIVER	<p><i>I certify that the answers given by me in this application are true and correct without omissions of any kind. I understand that any misleading or incorrect statements may render this application void. If I am employed and it is subsequently discovered that any answer given by me is incomplete, misleading, or incorrect, I may be terminated. I agree that the Village of Little Chute shall not be held liable in any respect if my employment is terminated because of false, incomplete, or misleading statements, answers, or omissions made by me in this application.</i></p> <p><i>I hereby understand and acknowledge that the positions listed on this application are not represented positions, which means that any employment relationship with the Village is of an "at will" nature, and that the employee may resign at any time or the employer may discharge the employee at any time with or without cause.</i></p> <p>Applicant Signature: _____ Date: _____</p>
--------------------------	---