

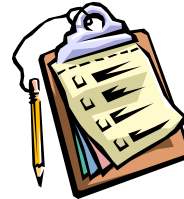


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## EMPLOYMENT APPLICATION PROCESS

◆ Please complete the forms below

1. Employment Application
2. Photo Authorization Form
3. Background Investigation Consent Form
4. Swim Background Information



◆ Return as soon as possible to:

Purchase Day Camp  
3095 Purchase Street  
Purchase, NY 10577

◆ Wait for a response letter from Purchase Day Camp



◆ If an interview has been approved, call (914)949-2636 to request an appointment.



◆ Return the three (3) Reference Forms, provided with the interview request letter, prior to the interview date.



James E. Kelly  
Director



Mark D. Miculcy  
Assistant Director

Name \_\_\_\_\_ Date \_\_\_\_\_  
(Last) (First)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone ( ) Cell Phone ( ) Birthdate \_\_\_\_\_

Social Security # - - Present Occupation \_\_\_\_\_ Sex  Male  Female

Email Address \_\_\_\_\_

EDUCATION	Name of School	Current Year or Last Year Completed	Did You Graduate?	Year Graduated
				Degree Received Or Current Major
High School		1 2 3 4	Yes No	-----
College		1 2 3 4	Yes No	-----
Post College		1 2 3 4	Yes No	-----
Trade School		1 2 3 4	Yes No	-----

**EXPERIENCE**  
 List PAID EXPERIENCE in order of most recent position.

ORGANIZATION	TYPE OF WORK	DATES	EMPLOYER	PHONE NUMBER
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

List any VOLUNTEER EXPERIENCE you have had.

1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

What related experience with children have you had? Teaching, recreation, babysitting, etc. (include ages and gender)

\_\_\_\_\_

\_\_\_\_\_

**CERTIFICATIONS** - Please indicate any current certifications you have by filling in the expiration date below.

AMERICAN RED CROSS/YMCA CERTIFICATIONS		OTHER CERTIFICATIONS
Lifeguard Training _____	Responding to Emergencies (RTE) _____	Teacher Certification _____
Lifeguard Training Instructor _____	Community CPR _____	RN/LPN Certification _____
Water Safety Instructor (WSI) _____	CPR for the Professional Rescuer _____	EMT Certification _____
Standard First Aid _____	Other (specify) _____	Other (specify) _____

Be sure to complete reverse side

Employment Application

### CHARACTER AND REFERENCES

List 3 people who know of your work such as teachers, employers, etc. No family members please.

NAME

ADDRESS

PHONE NUMBER

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Have you ever been charged, either criminally or civilly, with sexual abuse, sexual harassment or discrimination? Yes  No

Have you ever been convicted of a felony? Yes  No

If you answered Yes to either of the last two questions, please explain. \_\_\_\_\_

**ACTIVITIES** - Check once the activities below that you like to do. Check twice those activities that you could teach or help teach.

- |   |   |                                      |   |
|---|---|--------------------------------------|---|
| <input type="checkbox"/> Archery        | <input type="checkbox"/> Challenge Course | <input type="checkbox"/> Gymnastics  | <input type="checkbox"/> Science          |
| <input type="checkbox"/> Arts & Crafts  | <input type="checkbox"/> Computers        | <input type="checkbox"/> Hockey      | <input type="checkbox"/> Singing          |
| <input type="checkbox"/> Baseball       | <input type="checkbox"/> Cooking          | <input type="checkbox"/> Music       | <input type="checkbox"/> Story Time       |
| <input type="checkbox"/> Basketball     | <input type="checkbox"/> Dancing          | <input type="checkbox"/> Nature      | <input type="checkbox"/> Swimming         |
| <input type="checkbox"/> Baton Twirling | <input type="checkbox"/> Electronics      | <input type="checkbox"/> Photography | <input type="checkbox"/> Tennis           |
| <input type="checkbox"/> Camp Craft     | <input type="checkbox"/> Games (active)   | <input type="checkbox"/> Puppetry    | <input type="checkbox"/> Theatre          |
| <input type="checkbox"/> Carpentry      | <input type="checkbox"/> Games (quiet)    | <input type="checkbox"/> Rocketry    | <input type="checkbox"/> Video Production |
| <input type="checkbox"/> Other _____    |   |                                      |   |

### SUMMER POSITIONS

Check position you are applying for:

- General Counselor     Specialty Counselor     Waterfront     Food Service     Maintenance     Nurse

Age group preference:     3-4 Year Olds     5-6 Year Olds     7-8 Year Olds     9-10 Year Olds     11-13 Year Olds

Indicate your swimming ability:     Non-Swimmer     Beginner     Intermediate     Advanced

What experience, if any, do you have teaching swimming? \_\_\_\_\_

What general camp experience have you had, if any? Describe. \_\_\_\_\_

Are there any obligations requiring you to need time away from summer camp? \_\_\_\_\_

### SCHOOL YEAR POSITIONS

Check position you are applying for:     Area Supervisor     Class Instructor     Class Assistant

Age group preference:     5-6 Year Olds     7-8 Year Olds     9-10 Year Olds

Signature \_\_\_\_\_ Date \_\_\_\_\_

James E. Kelly  
Director



Mark D. Miculcy  
Assistant Director

Photo Authorization Form

I give permission for The Purchase Community Inc., to take my picture and include it with my application.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

James E. Kelly  
Director



Mark D. Miculcy  
Assistant Director

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Background Investigation Consent

I, \_\_\_\_\_, hereby authorize the Purchase Community Inc. and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable during the tenure of my employment with the company.

I release the Purchase Community Inc. and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete name and all information is true and correct to the best of my knowledge.

Legal First Name <i>(PRINT PLEASE)</i>		Middle Name		Last Name	
House/Apt #	Permanent Home Address			City	County (i.e. Westchester, Dutchess)
State	Zip	Social Security #	( ) Phone #	( ) Cell Phone #	
/ /					

\* Date of Birth: \_\_\_\_\_ Driver's License # \_\_\_\_\_ and State Issued \_\_\_\_\_ Email Address \_\_\_\_\_

\* NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. The Purchase Community Inc. is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age, Handicap or National Origin.

I understand that my failure to complete this form will cause me to forfeit the opportunity to interview for a position at the Purchase Community Inc.

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature of Parent/Guardian if under the age of 18 \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_



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**2010 SUMMER SALARY SCALE**

<b><u>AGE</u></b>	<b><u>TITLE</u></b>	<b><u>MIN. EXPERIENCE, EDUCATION &amp; CERT.</u></b>	<b><u>SALARY</u></b>
<b>Counseling TEAMS</b>			
H.S. Freshman	Counselor In Training (CIT)	Working Papers Required	500.
H.S. Sophomore	Assistant Counselor II	1 Yr. Experience Preferred	900.
H.S. Junior	Assistant Counselor III	2 Yrs. Experience Preferred	1200.
H.S. Senior	Assistant Counselor IV	2 Yrs. Experience Preferred	1500.
College Freshman	Senior Counselor I	2 Yrs. Experience (Subjective) plus 1 Yr. College Preferred	1850.
College Sophomore	Senior Counselor II	2 Yrs. Experience (Subjective) plus 2 Yrs. College Preferred	2150.
College Junior	Senior Counselor III	3 Yrs. Experience (Subjective) plus 3 Yrs. College Preferred	2450.
College Senior & Up	Senior Counselor IV	3 Yrs. Experience (Subjective) plus 4 Yrs. College Preferred	2800.
College Graduate	TEAM Leader	2 Yrs. (Subjective)	3050.
College Graduate	TEAM Leader	Teacher Certification	3500.
<b>Activity Leader</b>			
18 & Up	Leader I	1 Yr. in Specialty plus 1 Yr. College	3250.
21 & Up	Leader II	Teaching Certification	3700.
<b>Swim Leaders</b>			
16	Junior Swim Leader	LGT, CPR for Prof. Rescuer & SFA	1600.
17 to High School Senior	Assistant Swim Leader I	LGT, CPR for the Prof. Rescuer & SFA	2200.
College Freshman & Up	Assistant Swim Leader II	LGT, CPR for the Prof. Rescuer & SFA	2500.
College Graduate	Assistant Swim Leader III	LGT, CPR for the Prof. Rescuer & SFA	3050.
17 to High School Senior	Swim Leader I	WSI, LGT, CPR for the Profess. Rescuer & SFA	2750.
College Freshman & Up	Swim Leader II	WSI, LGT, CPR for the Profess. Rescuer & SFA	3050.
College Graduate	Swim Leader III	WSI, LGT, CPR for the Profess. Rescuer & SFA	3350.
21 & Up	Swim Program Supervisor	WSI, LGT, CPR for the Profess. Rescuer & SFA, Teaching Cert.	3700.
<b>Maintenance Staff</b>			
14 & Up	Maintenance Assistant I	Maintenance Experience Preferred	1000.
16 & Up	Maintenance Assistant II	Maintenance Experience Preferred	1500.
18 & Up	Maintenance Assistant III	1 Yr. Experience with Lawn Equip. plus Drivers License	2000.
20 & Up	Maintenance Assistant IV	2 Yrs. Experience with Lawn Equip. plus Drivers License	2500.
<b>Camp Nurse</b>	RN License Preferred, CPR for the Professional Rescuer & Responding to Emergencies		4800.
<b>Food Service Staff</b>			
14 & Up	Food Service Assistant I	Food Service Experience Preferred	1000.
16 & Up	Food Service Assistant II	Food Service Experience Preferred	1500.
18 & Up	Food Service Assistant III	Food Service Experience Preferred	2000.
20 & Up	Food Service Assistant IV	Food Service Experience Preferred	2500.
21 & Up	Food Service Manager	Food Service Manager Course and Experience	3200.

**Please Note:**

- ◆ Bus Monitor Add 250.
- ◆ WSI Certification For Non-Swim Specialist TEAM Members Add 250.
- ◆ Lifeguard Training Certification For Non-Swim Specialist TEAM Members Add 250.
- ◆ Emergency Medical Technician (E.M.T.) Add 250.
- ◆ ARC Responding To Emergencies Plus CPR For The Professional Rescuer Add 250.
- ◆ All Grades Refer to the year completed in the 2009-10 School Year.
- ◆ All Waterfront Certification requirements are subject to change by the State Health Department. All Minimum State Certification requirements will be observed.
- ◆ Camper Enrollment Benefit: Fees for TEAM Member children will be deducted from the employees' gross salary at a rate of \$700 per child.

James E. Kelly  
Director



Mark D. Miculcy  
Assistant Director

Name \_\_\_\_\_ Age \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

1. Are you comfortable in the water?  Yes  No

2. Have you taken and passed any American Red Cross (ARC) or Purchase Day Camp (PDC) Learn to Swim Program Levels?  Yes  No

If yes, check highest level passed:

	<u>ARC Level Names</u>	<u>PDC Level Names</u>	<u>Level Description</u>
<input type="checkbox"/> Level 1	Water Exploration	Waterbug	Water entry and comfort
<input type="checkbox"/> Level 2	Primary Skills	Penguin	Float without support, locomotion skills
<input type="checkbox"/> Level 3	Stroke Readiness	Seal	Front & back crawl, tread water, diving, safety
<input type="checkbox"/> Level 4	Stroke Development	Sea Lion	Develop confidence in learned strokes
<input type="checkbox"/> Level 5	Stroke Refinement	Sailfish	Introduction of butterfly, feet-first and springboard diving
<input type="checkbox"/> Level 6	Skill Proficiency	Porpoise	Polish all swim strokes with ease, Smoothness and distance
<input type="checkbox"/> Level 7	Advanced Swimmer	Kingfish	Perfect strokes, advanced rescue skills

If you have not taken or passed any of these levels, what would you feel your swim level is now based upon the descriptions?

3. Have you ever taught swimming?  
Where? \_\_\_\_\_  
What level? (use description above) \_\_\_\_\_  
How many years? \_\_\_\_\_

4. What Purchase Day Camp Level of Swimming would you feel most comfortable teaching?

Check one:  L 1  L 2  L 3  L 4  L 5  L 6  L 7

5. Have you taken and passed any of the following Certification Courses? If so, indicate the expiration date.

LGT \_\_\_\_\_ EMT \_\_\_\_\_  
WSI \_\_\_\_\_ RTE \_\_\_\_\_  
SFA \_\_\_\_\_ CPR for the Professional Rescuer \_\_\_\_\_  
Other \_\_\_\_\_

I understand that as a counselor, I will be asked to teach or help teach swimming instruction at Purchase Day Camp.

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**Swim Background Information**



**A Simple Question. . . How did you learn about the job at Purchase Day Camp?**

**(Check all that apply)**

- I saw it in the "Classified" section of a newspaper**
- I saw the display ad in the Journal News newspaper**
- I searched careerbuilder.com**
- I saw it in an issue of "Westchester Family" magazine**
- I saw it in an issue of the Rye Sound Shore Review**
- I saw it on the website "KidsCamps.com"**
- A friend told me about it**
- Other**  

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**Please return this with the application! Thanks!**