

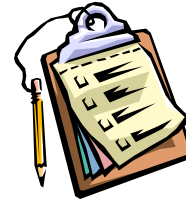


I just **LOVE** it here !

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"/> GaGa Ball | <input type="checkbox"/> Science |
| <input type="checkbox"/> Hockey | <input type="checkbox"/> Tennis | <input type="checkbox"/> Arts & Crafts | <input type="checkbox"/> Nature |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Golf | <input type="checkbox"/> Music | <input type="checkbox"/> Carpentry |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Dance | <input type="checkbox"/> Singing | <input type="checkbox"/> Computers |
| <input type="checkbox"/> Soccer | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Photography | <input type="checkbox"/> Improvisation |
| <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Swimming | <input type="checkbox"/> Cooking | <input type="checkbox"/> Theatre |
| <input type="checkbox"/> Football | <input type="checkbox"/> Exercise | <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: NonSwimmer 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

I just **LOVE** it here!

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 ____/____/____



AGE/GRADE	TITLE	MIN. EXPERIENCE, EDUCATION & CERT.	SALARY 2020
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Counseling TEAMS

H.S. Sophomore	Assistant Counselor II	1 Yr. Experience Preferred	\$900
H.S. Junior	Assistant Counselor III	2 Yrs. Experience Preferred	\$1,200
H.S. Senior	Assistant Counselor IV	2 Yrs. Experience Preferred	\$1,500
College Freshman	Senior Counselor I	2 Yrs. Experience (Subjective) plus 1 Yr. College Preferred	\$1,800
College Sophomore	Senior Counselor II	2 Yrs. Experience (Subjective) plus 2 Yrs. College Preferred	\$2,100
College Junior	Senior Counselor III	3 Yrs. Experience (Subjective) plus 3 Yrs. College Preferred	\$2,400
College Senior & Up	Senior Counselor IV	3 Yrs. Experience (Subjective) plus 4 Yrs. College Preferred	\$2,800
College Graduate	TEAM Leader	2 Yrs. (Subjective)	\$3,400
College Graduate	TEAM Leader	Teacher Certification	\$4,000

Activity Leader

College Graduate	Leader I	2 Yrs. in Specialty (Subjective)	\$3,600
College Graduate	Leader II	Teaching Certification	\$4,200

Swim Leaders

16	Swim Leader I	LGT, CPR for Prof. Rescuer & SFA	\$1,500
17 to High School Senior	Swim Leader II	LGT, CPR for the Prof. Rescuer & SFA	\$2,000
College Freshman	Senior Swim Leader I	LGT, CPR for the Prof. Rescuer & SFA	\$2,300
College Sophomore	Senior Swim Leader II	LGT, CPR for the Prof. Rescuer & SFA	\$2,600
College Junior	Senior Swim Leader III	LGT, CPR for the Prof. Rescuer & SFA	\$2,900
College Senior & Up	Senior Swim Leader IV	LGT, CPR for the Prof. Rescuer & SFA	\$3,300
17 to High School Senior	Water Safety Instructor II	WSI, LGT, CPR for the Profess. Rescuer & SFA	\$2,250
College Freshman	Senior Water Safety Instructor I	WSI, LGT, CPR for the Profess. Rescuer & SFA	\$2,550
College Sophomore	Senior Water Safety Instructor II	WSI, LGT, CPR for the Profess. Rescuer & SFA	\$2,850
College Junior	Senior Water Safety Instructor III	WSI, LGT, CPR for the Profess. Rescuer & SFA	\$3,150
College Senior & Up	Senior Water Safety Instructor IV	WSI, LGT, CPR for the Profess. Rescuer & SFA	\$3,550
21 & Up	Swim Program Supervisor	WSI, LGT, CPR for the Profess. Rescuer & SFA, Teaching Cert.	\$4,000

Camp Nurse

College Graduate	RN License Preferred, CPR for the Professional Rescuer & Responding to Emergencies		\$4,800
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Maintenance Staff

16 & High School Sophomore	Maintenance Assistant II	Maintenance Experience Preferred	\$1,500
High School Junior & Senior	Maintenance Assistant III	1 Yr. Experience with Lawn Equip. plus Drivers License	\$1,800
College Freshman & Up	Maintenance Assistant IV	2 Yrs. Experience with Lawn Equip. plus Drivers License	\$2,100

Please Note:

.. Bus Monitor		add \$500
.. WSI Certification For Non-Swim Specialist TEAM Members		add \$250
.. Lifeguard Training Certification For Non-Swim Leader 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 immediately prior to the camp season.		
.. Waterfront and other 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 \$1000 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