

Date Received

OFFICE USE ONLY

HIRED _____

POSITION _____

City of Austin Part Time Summer Application for Public Works & Park & Recreation Positions

Name _____

Date _____

Current Address _____

Current Telephone _____

Permanent Address _____
If different

Permanent Telephone _____

Application for Position as _____

EDUCATION

	Attended Institutions	Circle Years	Graduation Date	Major and Minor	Degree or Diploma
		Completed or Dates Attended			
High School		9 10 11 12			
College or University		1 2 3 4			
Post-Graduate					
Special Training in Recreation					

EXPERIENCE Start with present or last job.

Employer	Address	Kind of Work	Dates Employed		Hourly Rate/ Salary
			Begun	Ended	

REFERENCES Adults, No Relatives

Name	Telephone Number	Address	Position or Occupation

In the following list of activities, check once those in which you have taken part or had special training.
Check twice those you have organized or directed and in which you are prepared to train others.

MAINTENANCE

Lawn Mowing _____
 Turf Maintenance _____
 Street Maintenance _____
 Equipment Operations _____
 Laboratory _____

 General Construction _____
 Horticulture _____

DANCING

Ballroom _____
 Folk _____
 Modern _____
 Square _____
 Tap _____
 Jazz _____

PHYSICAL ACTIVITIES

Baseball _____
 Basketball _____
 Bowling _____
 Field Hockey _____
 Softball (Fast Pitch) _____
 Softball (Slow Pitch) _____
 Football _____
 Golf _____
 Gymnastics & Stunts _____

NATURE ACTIVITIES

Camping _____
 Hiking _____
 Woodcraft _____

AQUATICS &

FIRST AID TRAINING Check
If current

Standard First Aid _____
 Community CPR _____
 Infant & Child CPR _____
 Emergency Water Safety _____
 Lifeguard Training _____
 W.S.I. _____
 Jeff Ellis & Associates _____

Ice Hockey _____
 Soccer _____
 Table Tennis _____
 Tennis _____
 Track & Field _____
 Tumbling _____
 Volleyball _____
 Wrestling _____

OFFICIATING

Basketball _____
 Volleyball _____
 Softball _____

Indicate the particular phases of maintenance work in which you are especially interested and for which you believe you are best qualified.

Indicate the particular phases of recreation work in which you are especially interested and for which you believe you are best qualified.

What days are you available? _____ What hours? _____

Available beginning _____ (day and month) to _____ (day and month)

If experience with the following age groups, explain: Pre-school _____ Elementary Age _____

Middle School _____ Senior High _____

Adults _____ What age do you prefer? _____

List extra curricular activities and interests in school or college _____

What is your favorite form of recreation? _____ Hobby? _____

Person to notify in case of emergency _____

I certify that answers given are true and complete, to the best of my knowledge.

Date _____

Signature of applicant _____