

## Town of Wilbraham

## PARKS & RECREATION DEPARTMENT 2025 SPRING/SUMMER EMPLOYMENT APPLICATION

Return to: Town of Wilbraham, WPRD, 45C Post Office Park, Wilbraham, MA 01095

(ALL POSITIONS (EXCEPT FOR SUMMER BBALL SCOREKEEPER) REQUIRE APPLICANT TO BE A MINIMUM OF 16 YEARS OF AGE TO APPLY) POSITION(S) APPLYING FOR: If you are applying for more than one, please number in order of preference

Spring/Summer:  Baseball/Softball Un  Spec Day Camp Dire  Spec Day Camp Ass:  Spec Day Camp Cou  Head Lifeguard-Do y  Summer Basketball	□ Program □ Spec Day □ Lifeguard							
*If checking off multiple				:				
<u> </u>	Tuesdays	Wednesdays	Thursdays	Fridays	Saturdays	Sundays		
Hours:					<del></del>			
Name (Last, First, M								
Address	Street			City	State	Zip		
Cell Phone	En	nail Address:				Zip		
Date you are available								
Do you have summer			: Dates?					
Name of School or College: Highest educational level completed?								
				(as of sun	nmer 2025)			
Valid driver's license	?? □ NO □ YE	S Are you 16 ye	ears or older?	□ NO □ YE	ES			
Are you a United Sta  I understand that any offe Immigration Reform Act States and present accept  EXPERIENCE: Please provide your a you are applying for:	er for employment i of 1986, and that th table proof of their activity record fo	is conditional upon sa he Town will hire only lawful employment st or all volunteer or	tisfactory completi those individuals atus and identity. work experienc	on of the verifica who are legally a	tion process as requ tuthorized to work in relevant to the p	uired by the n the United		
REFERENCE: Please provide the na and abilities regardin								
Please Read Carefully a I hereby affirm that the i falsified information or si for employment and ma application or made duri intended to be, nor shoul previous employers and release such employers as	nformation provide ignificant omission by be considered jung my interview for the construed as a corganizations name and individuals from	is on either this form of justification for dism for employment. I acl a contract between the din this application	or during my intervissal. I authorize knowledge that not be town and myself to provide any and ges whatsoever that	riew may disqualinvestigation of the statemer. I hereby authord all information it may arise from	ify me from further all statements con ents made in this a rize persons, school whether personal of	consideration tained in this pplication are s, current and or otherwise. I		
Signature of Applican	ດເ:		Da	ıte:				



## **WORK EXPERIENCE**

Start with your current or last position. You may include part-time, U.S. military or volunteer experience. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer:	Job Title	From:	То:
Name	Work Performed		
Address			Reason for leaving:
Supervisor			
Telephone			
May we contact?			
yes no			
Employer	Job Title	From:	То:
Name	Work Performed	_	
Address			Reason for leaving:
Supervisor			
Telephone			
May we contact?			
yes no			
Employer	Job Title	From:	То:
Name	Work Performed		
Address			
Supervisor			Reason for leaving:
Telephone		_	
May we contact?			
yes no			