

CLINTON CITY RECREATION

1651 W 2300 N. Clinton, Utah 84015 * 801-614-0780

Equal opportunity employer

YOUTH TEMPORARY/SEASONAL APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: Please complete (print or type) all sections, date and sign. This application form is intended for those individuals 14-17 years of age. An incomplete application may result in elimination from consideration for employment.

NAME (Last, First, Middle): Email:

Address (Street, City, State, zip): Phone Number:

Would you be able to perform the duties required for this position with reasonable accommodations?
Yes _____ No _____

Have you ever been dismissed from a job for cause? Yes _____ No _____

Have you ever applied for a position in this department or any department in Clinton City before?
Yes _____ No _____

If yes, which department, and when?: _____

Do you have a current Davis County Food handlers permit? Yes _____ No _____

Expiration date _____ (food handlers permit)

List any special skills you have that would help this department:

State why you would like to obtain this position:

What hours and days would you be available to work (am-pm):

RECORD OF EDUCATION

Jr High School

Name of School _____ City/State _____

Grades Completed _____

High School

Name of School _____ City/State _____

Grades Completed _____

College/University

Name of School _____ City/State _____

Level of Education Completed _____

Other Training or School: _____

RECREATION EXPERIENCE

In the space below, give your complete recreation and or competitive experience, list sports/activities you have played, coached, officiated or administered:

List where & when if you have concession, sales and/or scorekeeping experience:

SUPERVISOR EXPERIENCE

In the space below, give your complete supervisory experience, list sports/activities you have overseen:

Share an experience with a player, coach or spectator where you had to de-escalate a situation:

PERSONAL REFERENCES (No former employers or relatives)

Name _____

Email _____ Relationship _____ PHONE _____

Name _____

Email _____ Relationship _____ PHONE _____

Name _____

Email _____ Relationship _____ PHONE _____

RECORD OF EMPLOYMENT

In the space below, give your complete record of employment for the past ten years, also list other experiences which are related to your qualification for this position. Start with the present and work back, if more space is needed use the back of this page.

(1) Employer _____ Title _____

PHONE _____ Email _____

Dates of Employment: _____

Duties:

Reason for leaving:

Salary/Wage: _____

May we contact the employer listed above? Yes _____ No _____

(2) Employer _____ Title _____

PHONE _____ Email _____

Dates of Employment: _____

Duties:

Reason for leaving:

Salary/Wage: _____

May we contact the employer listed above? Yes _____ No _____

(3) Employer _____ Title _____

PHONE _____ Email _____

Dates of Employment: _____

Duties:

Reason for leaving:

Salary/Wage: _____

May we contact the employer listed above? Yes _____ No _____

The facts set forth above in my application for employment are true and complete. I understand that if employed false statements on this application shall be considered sufficient cause for dismissal.

Signature: _____ Date: _____