



MUST BE 16 YEARS OLD (\*15 YEARS OLD FOR LIFEGUARDS ONLY) BY JUNE 1<sup>ST</sup> FOR CONSIDERATION FOR ALL POSITIONS EXCEPT FOR CAMP DIRECTOR, WHICH REQUIRES APPLICANTS TO BE AT LEAST 21 YEARS OLD. IF YOU ARE INTERESTED IN SEASONAL EMPLOYMENT PLEASE RETURN THIS APPLICATION TO KINGSTON PARKS AND RECREATION OFFICE NO LATER THAN APRIL 11<sup>TH</sup>.

**THIS FORM MUST BE COMPLETED IN ITS ENTIRETY TO BE CONSIDERED FOR EMPLOYMENT.  
SEE BACK OF THIS PAGE FOR ADDITION INFORMATION**

Name \_\_\_\_\_  
First Middle Initial Last

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Telephone (cell) \_\_\_\_\_ Social Security No. \_\_\_\_-\_\_\_\_-\_\_\_\_

### SEASONAL POSITION

Position applying for \_\_\_\_\_  
Have you worked for the City of Kingston in the past? \_\_\_\_\_  
If so, what position did you work in? \_\_\_\_\_

### EDUCATION

High School Attended \_\_\_\_\_  
Did you graduate? If not, what grade are you currently in? \_\_\_\_\_

College Attended \_\_\_\_\_  
Did you graduate? What is your degree in? \_\_\_\_\_  
If not, what year are you currently in? \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Contact Number \_\_\_\_\_

### WORK EXPERIENCE

Name of Employer: \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Employer Contact Information \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Employer: \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Employer Contact Information \_\_\_\_\_  
Job Duties: \_\_\_\_\_



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Name of Employer: \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Employer Contact Information \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Please list two references. They may not include family members.

Name _____	Name _____
Contact Information _____	Contact Information _____
Relationship _____	Relationship _____

Do you have a driver's license? \_\_\_\_\_

List any certifications:

_____	Exp. Date: _____
_____	Exp. Date: _____

**AVAILABILITY**

Earliest available starting date: \_\_\_\_\_  
Last available working date for 2025: \_\_\_\_\_

PLEASE LIST ALL DATES YOU WILL BE UNABLE TO WORK:

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*Interviews will be held for consideration. If hired to work for the 2025 season, trainings will be mandatory in order to proceed.*

I declare, subject to penalty of perjury and termination from the employment, that the statements made in the application are true to the best of my knowledge.

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

**Return this form to the Parks and Recreation Office at  
467 Broadway  
Kingston, NY 12401  
or e-mail to [ejohnson@kingston-ny.gov](mailto:ejohnson@kingston-ny.gov)**