



Limerick Township
 Department of Parks & Recreation
 646 West Ridge Pike Limerick, PA 19468
 610-495-6432 www.limerickpa.org



Application for Seasonal Employment – Summer Shamrock Camps 2012

Please Print & Fill Out Completely:

First Name: _____ Last Name: _____

Address: _____ City: _____ State/Zip: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Social Security #: _____

E-mail Address: _____

EDUCATION INFORMATION:

High School _____ Current Yr. in School: _____ Grad. Yr. _____

High School City & State _____

College/University _____ Current Yr. in School: _____ Grad. Yr. _____

College City & State _____

Concentration/Major _____

Post Graduate Education _____ Grad. Yr. _____

SKILLS & TRAINING: Please list all applicable skills and training for applicable job (babysitting, community service, school clubs, computer skills, etc.)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



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EMPLOYMENT: Please list your last or present job.

Company Name: _____ Position: _____

Work Dates: _____ Work Phone: _____

REFERENCES: Please list two personal and/or professional references.

1.
Name: _____ Phone: _____

Relationship: _____ Company/School: _____

2.
Name: _____ Phone: _____

Relationship: _____ Company/School: _____

Limerick Township is an Equal Opportunity Employer. Limerick Township considers applicants for all positions with out regards to race, color, religion, creed, gender, national origin, disability or any other legally protected status.

Summer Camp Positions to be consider for: (Please check)

Lil' Shamrocks (3-5 yrs.) _____ Camp Shamrock (K-4th) _____ Shamrock Adventures (5th-8th) _____

Site Supervisor _____ Assistant Site Supervisor _____ Camp Counselor _____

LTP&R APPLICATION CONSENT

With the submission of this application, I certify that all statements are true and correct to the best of my knowledge and belief. Any misrepresentation or omissions on this application may be cause for rejection of the application or dismissal after employment. I authorize investigation of all statements contained in this application and authorize the Township to perform a background check as may be necessary in arriving at an employment decision.

I understand that all employees of the Township are employed at-will, which means that either the Township or the employee may terminate the employment relationship at any time, with or without notice, and for any and no reason. No employee or representative of the Township has authority to enter into any agreement specifying duration of employment or abrogating an employee's at-will status. I understand that this application is not intended to confer any contractual right or obligation to any party and that the Township reserves the right to change any practice, policy or procedure with or without notice, at its sole discretion.

Applicant's Signature: _____ Date: _____