Village of New Maryland

SUMMER STUDENT EMPLOYMENT APPLICATION FORM

Office Use Only:
Date Received:
_____

Application Deadline: Friday, March 20, 2020 at 4:30 pm

Mailing Address: 584 New Maryland Highway, New Maryland, NB, E3C 1K1
Or e-mail to Michelle Sawler, Recreation Coordinator – michelle.sawler@vonm.ca

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Please Print, Complete and Return Application Form (drop off, mail or e-mail)
Please attach a copy of your resume AND a copy of certifications/training credentials.

Position(s) applying for (specify in preferred order, if applicable). In 2020, the Village will be hiring the following summer student positions: *Day Camp Counsellor (7), Recreation Maintenance Labourer (4), Public Works Maintenance Labourer (4)*

(1) _____
(2) _____
(3) _____

Available Start Date for Summer Employment: _____

Personal Information:

_____
Family Name First Second

_____
Mailing Address

_____
City/Village Province Postal Code

_____
Home Phone Number Cell Phone Number E-mail Address

Language(s) Spoken: English_____ French_____ Other (please specify): _____
Language(s) Written: English_____ French_____ Other (please specify): _____

Education:

EDUCATION	CURRENT GRADE OR YEAR	NAME & ADDRESS OF INSTITUTION	MAJOR
High School			
College			
University			
Other			

Were you a student during the past school year (2019-2020)? _____
Will you be returning to school in the fall 2020? _____

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Training/Certifications:

Do you have a valid Driver's License? _____ Do you have access to a vehicle? _____

Do you have a current certificate in Standard First Aid & CPR? _____ If Yes, year attained: _____

Do you have any other relevant training or certification for the position being applied for? Yes / No

If yes, _____ (also, please attach a copy to your application)

Employment History:

Please record in sequence beginning with present or most recent employer.

Employer's Name:	Position Held:
Employer's Phone Number:	Your Duties:
Supervisor's Name:	
Duration of Employment:	
Reason for Leaving:	
Employer's Name:	Position Held:
Employer's Phone Number:	Your Duties:
Supervisor's Name:	
Duration of Employment:	
Reason for Leaving:	
Employer's Name:	Position Held:
Employer's Phone Number:	Your Duties:
Supervisor's Name:	
Duration of Employment:	
Reason for Leaving:	

Were you previously employed by the Village of New Maryland? _____ If Yes, when? _____

References - Please provide two, with at least one work reference (if applicable):

(1) Name: _____
Affiliation:_____
Phone # _____
E-mail: _____

(2) Name _____
Affiliation:_____
Phone #: _____
E-mail: _____

DO YOU REQUIRE ANY TIME OFF THIS SUMMER? ***IF YES, YOU MUST INDICATE ANY DATES (WEEKDAYS) BELOW.*** These times **must** be approved prior to commencement of work:

_____

I certify that the statements made in this application are true and complete to the best of my knowledge. I am aware that misrepresentation or falsification may result in rejection of my application or dismissal from employment.

Date: _____ Signature:_____

Please note: if you are selected for an interview, you will be contacted by the Recreation Coordinator no later than Friday, April 3rd.