

**Valley Falls - Pittstown Youth Commission**  
Summer Program Employment Application

ALL applications **MUST** be **MAILED** and postmarked by **May 15<sup>th</sup>**

Send to:     Mary McNeice  
               Box 153  
               Valley Falls, NY 12185

**CIRCLE DESIRED POSITION**

**Senior Counselor** - minimum 16 years and have had some training supervising children (ex. junior counselor)

**Junior Counselor** - minimum 15 years and two years attending the program

**PLEASE PRINT**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Educational Background**

Elementary School \_\_\_\_\_

Address \_\_\_\_\_

Dates Attended \_\_\_\_\_

High School \_\_\_\_\_

Address \_\_\_\_\_

Dates Attending \_\_\_\_\_

Graduation Date \_\_\_\_\_

College (if any) \_\_\_\_\_

**Work Experience:**

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Write a brief explanation about your school experiences. Include academics, club involvement, sports, and extracurricular activities.

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Write a brief explanation of your community activities or involvement.

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Tell why you would be a good candidate for employment in the position you indicated. Include any experiences or skills you have which would be useful in this position.

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List three references and their **PHONE NUMBERS**.

Please do not include relatives.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Have you been certified in First Aid this past year? \_\_\_\_\_

If so, enclose copy of your card.

Have you been certified in CPR this past year? \_\_\_\_\_

If so, enclose copy of your card.

The Program runs from **July 1 - August 2**.

If there are any dates you cannot work, please list them below.

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The Youth Commission is an Equal Opportunity Employer.

**All Counselors must:**

**\*Like children**

**\*Be able to plan activities**

**\*Be on time**

**\*Be able to stay off of their cell phone**