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# TOWN OF MEDFIELD 2024 Camp Counselor Application FOR EMPLOYMENT

## Park & Recreation Department

124 North Street  
Medfield, MA 02052  
508-359-2715



**ALL CAMP COUNSELOR APPLICATIONS ARE DUE BY MONDAY, March 25th  
To The Pfaff Center or By Email to: [jconley@medfield.net](mailto:jconley@medfield.net)**

The Medfield Park and Recreation Department is looking for Camp Counselors for the Summer 2024 season! This job would be ideal for a candidate that loves the outdoors, being around children, and likes being part of a team. We are looking for responsible, energetic, outgoing candidates who want to have a fun eight weeks of summer. We have different age groups for kids to work with. If you can not commit to the eight week program, you are more than welcome to apply to be a substitute and help out when you can. We are excited for Summer 2024 and look forward to receiving your applications. All applicants are strongly encouraged to be 16+.

**All counselors must be CPR/First Aid Certified and participate in water activities  
\*\*Teen Extreme counselors must have valid drivers license and be comfortable driving a van**

### Interview Process

Each candidate will need to attend and interview. There will be three different dates to choose from. Please check which date would work best for your schedule. Each in person interview will be conducted in a group setting, smaller groups and then one-one interviews within the 2 hour block. If none of these dates work for you, please email Jacqui Conley at [jconley@medfield.net](mailto:jconley@medfield.net) to set up a Zoom Interview. *\*All camp counselors are expected to work Monday-Friday 8:30am- 4:15 pm.*

**Please check off which date you'll be interviewing on:**

- 1) **Friday, March 29th, 6:00—8:00pm** \_\_\_\_\_
- 2) **Saturday, March 30th, 9:00—11am** \_\_\_\_\_
- 3) **Wednesday, April 3rd (No School Day), 1:30—3:30pm** \_\_\_\_\_
- 4) **Zoom Interview (during the week of April 1st & 8th)** \_\_\_\_\_

\*Zoom Interviews are only for candidates who cannot do an in-person interview on the given dates above.

**\*\* All camp counselors must be able to stand in waist deep water and supervise water activities at camp and on field trips\***

**Camp Dates: June 24th-August 16th (subject to change)**  
**PLEASE FILL IN YOUR INFORMATION: *(Please Print)***

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**PLEASE CHECK THE AREAS IN WHICH YOU ARE INTERESTED**

- Adventure Camp - Ages 8-13     Discovery : Ages 4-8     Teen Extreme—Ages 11-14 ( 3 weeks)  
 Site Supervisor     Specialist     Substitute Counselor

If working with children, I prefer to work with children ages     4-8     9-13     Any age

Have you ever worked for the Medfield Recreation Department?  Yes  No

If yes, when? \_\_\_\_\_ In what capacity? \_\_\_\_\_

**Are you related to any Town Employee :**  Yes  No

**Are you currently CPR Certified**  Yes  No

**Are you currently Firs Aid Certified**  Yes  No

( We will offer courses for certification, if you are unable to attend you'll need to be certified on your own before camp starts)

**TIME OFF REQUEST: Camp is eight weeks, or 40 days. Are you planning to take time off or leave to go back to school that may conflict with the time of employment?**  Yes  No **If yes, when and why?( Note if you need extensive amount of time off, consider applying for a sub position)** \_\_\_\_\_

**\*\*Applying for Substitute What weeks can you work:**

**Mandatory Training Dates**

**All candidates who are selected for the summer camp counselor position will be required to attend mandatory trainings which are held on:**

**Thursday, May 23, 6 pm-7:30 pm**

**Saturday, June 15th, 9 am-1 pm**

**Monday, June 17th, 9 am-1pm**

**Tuesday, June 18th, 9 am –1pm**

**Thursday, June 20th, 9 am-1 pm**

## EMPLOYMENT HISTORY

Employer Name	Job Title	Dates of Employment	Supervisor	Reason for Leaving	May we contact this employer (Yes/No)

## EDUCATION

	Name of School	Major	Years Completed	Course Study
High School				
Undergraduate College				
Graduate College				

## ACTIVITY INVOLVEMENT– SPORTS, CLUBS, ETC

ACTIVITY NAME	POSITION HELD	YEARS INVOLVED	ACTIVITY LEADER NAME

## REFERENCES– PLEASE DO NOT INCLUDE ANY FAMILY

NAME AND ADDRESS	PHONE

## RELATED QUESTIONS *(Please use back, if needed)*

Why are you interested in working at the Medfield Recreation Department this summer? What do you hope to gain?

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What are some qualities, assets or characteristics you possess that would make you a favorable candidate for this position?

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How would you ensure that you provide a great experience for our participants this summer?

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Who is your role model? What qualities do they have to make them someone you look up to?

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## PERSONAL INFORMATION

The Town of Medfield is subject to certain labor provisions of persons under the age of 18.

Are you under age 18?

Yes  No

If yes, please indicate your age: \_\_\_\_\_

Only US Citizens or other persons who have a legal right to work in the US are eligible for employment. Can you, upon employment, submit documentation verifying your legal identity and legal right to work in the US?

Yes  No

### **An Equal Opportunity/Affirmative Action Employer**

*The Town of Medfield is an Equal Opportunity Employer. Town of Medfield considers applicants for all positions without discrimination on the basis of race, color, religion, sex, marital status, national origin, age, physical or mental disability, sexual orientation, ancestry, veteran status or any other class protected by federal, state, or local law. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by local, state or federal law.*

## Signature of Applicant

### CAREFULL READ ALL PARTS OF THIS APPLICATION FORM BEFORE SIGNING

- I understand the acceptance of this application by the Town of Medfield does not imply that I will be employed.
- The information that I have provided is true and complete. I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.
- I understand that any offer of employment that I receive from the Town of Medfield is contingent upon my successful completion of pre-employment screening process including but not limited to the Town of Medfield receiving satisfactory references, a satisfactory criminal history and criminal Offense Record Inquiry if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination.
- In processing my application for employment, the Town of Medfield my verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics.
- I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting my present and former employers, by contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.
- I hereby release the Town, my present and former employers and all individuals contacted for factual information about me from any liability for damages arising from furnishing the requested information.
- If employed by the Town of Medfield, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, that I may be subject to drug/and or alcohol testing, that the Town may request a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record, or verify my license(s) or certification(s) as required for employment at any time during my employment. I hereby authorize the Town to conduct a CORI check on me as a condition of applying for a position with the Town, where applicable, and agree to sign a CORI Request Form reflecting my authorization of the CORI check. I further release the Town and its agents from any and all potential claims associated with the Town's performing a CORI check on me in connection with my application for a position with the Town. As a condition of employment an employee may be required to provide additional or updated information especially if this employee has been on workers comp and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.
- I understand the Town of Medfield is at at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

***My signature certifies that I have read and agree with the above statements and all statements contained in this application for employment.***

Applicant's Name (please print) \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

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