



# Town of Beekman Recreation & Parks

29 Recreation Center Road  
Hopewell Junction, NY 12355  
845-227-5783 845-227-9685F

[redirector@townofbeekmanny.us](mailto:redirector@townofbeekmanny.us) [www.beekmanrec.com](http://www.beekmanrec.com)



## Contractor Application

Last Name	First Name	Middle Initial	Email
Home Phone	Cell Phone	Work Phone	
Street	Town	State	Zip
Non-Summer Position/s Desired		Summer Position/s Desired	

Do you meet the minimum age requirement described in the position description?  No  Yes  DNA

Are you a resident of the Town of Beekman?  No  Yes

Have you been previously employed by, or contracted with, the Beekman Rec  No  Yes: List years & positions: \_\_\_\_\_

Have you ever been convicted of a crime (other than traffic violations)?  No  Yes: please state offense: \_\_\_\_\_, date: \_\_\_\_\_ and location: \_\_\_\_\_. (A conviction record will not necessarily be cause for disqualification)

Describe any experience you have had working with the age group/s you are applying to work with: \_\_\_\_\_

Please list any relevant professional experience and affiliations (continue on separate paper if needed): \_\_\_\_\_

List updated certifications, licenses and trainings (Please enclose a copy):

<u>Type</u>	<u>Expires</u>	<u>Type</u>	<u>Expires</u>
Drivers License # _____	_____	CPR (Type) _____	_____
State _____	_____	Lifeguard _____	_____
Community First Aid _____	_____	WSI _____	_____
AED _____	_____	Project Adventure _____	_____
RTE _____	_____		

### EDUCATION

Name of Schools (High School, College, Graduate School)	Major area of study	Dates	Highest Grade Completed	Degree or Credits

**EMPLOYMENT EXPERIENCE** - List most recent experiences first-enclose resume or use additional paper as needed

EMPLOYER'S NAME , ADDRESS & EMAIL	POSITION/MAJOR RESPONSIBILITIES	REASON FOR LEAVING	
MAY WE CONTACT?	TYPE of BUSINESS	DATES EMPLOYED From      To	SUPERVISOR'S NAME & PHONE
EMPLOYER'S NAME , ADDRESS & EMAIL	POSITION/MAJOR RESPONSIBILITIES	REASON FOR LEAVING	
MAY WE CONTACT?	TYPE of BUSINESS	DATES EMPLOYED From      To	SUPERVISOR'S NAME & PHONE
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MAY WE CONTACT?	TYPE of BUSINESS	DATES EMPLOYED From      To	SUPERVISOR'S NAME & PHONE

**List 3 non-relatives and non-peers** who can attest to your character, work ethic and ability to do the type of work you are applying to perform and then distribute your references to those individuals.

**Reference 1:**

\_\_\_\_\_  
Printed Last Name                      Printed First Name                      Position/Title

\_\_\_\_\_  
Cell phone                      Work phone                      Home land line

\_\_\_\_\_  
email address                      Street address                      Town                      State                      Zip

**Reference 2:**

\_\_\_\_\_  
Printed Last Name                      Printed First Name                      Position/Title

\_\_\_\_\_  
Cell phone                      Work phone                      Home land line

\_\_\_\_\_  
email address                      Street address                      Town                      State                      Zip

**Reference 3:**

\_\_\_\_\_  
Printed Last Name                      Printed First Name                      Position/Title

\_\_\_\_\_  
Cell phone                      Work phone                      Home land line

\_\_\_\_\_  
email address                      Street address                      Town                      State                      Zip

- I certify that the statements made on submitted materials are true and correct to the best of my knowledge.
- I understand that any misinformation, falsification or failure to disclose pertinent information will result in the termination of my services.
- I authorize all present or prior employers, educational institutions and the individuals listed by me, to release to Beekman Recreation, any information relevant to my application, including information about my employment record, and hereby release them from liability and responsibility for doing so.
- I understand that Beekman Rec reserves the right to conduct a criminal background check.
- If hired I agree to consent to random blood and alcohol testing and that failure to submit to such testing immediately shall be grounds for dismissal.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date