



**Town of Beekman Recreation & Parks**

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

[recdirector@townofbeekman.ny.us](mailto:recdirector@townofbeekman.ny.us) [www.beekmanrec.com](http://www.beekmanrec.com)



**Mower Application**  
**(please print clearly)**

\_\_\_\_\_  
Last Name First Name Middle Initial Email

\_\_\_\_\_  
Home Phone Cell Phone Work Phone

\_\_\_\_\_  
Street Town State Zip

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 Town of Beekman \_\_\_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 for the position you are applying to work with:  
\_\_\_\_\_  
\_\_\_\_\_

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

**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
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

**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.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Dutchess County Summer Recreation 2025 Application

<b>Title of Position:</b> _____	<b>For Dutchess County HR Use Only</b> Approved _____ Conditional _____ Disapproved _____
<b>Municipality:</b> _____	

1. Social Security Number: _____ - _____ - _____	3. If you are under 18 years of age, can you provide proof of eligibility to work? Yes _____ No _____
2. _____ Last Name, First Name, Initial	4. <b>If the position you are applying for has minimum or maximum age limits (see job description), please enter your date of birth:</b> Month _____ Day _____ Year _____
Address _____	5. Are you currently a U.S. citizen? Yes _____ No _____ If "No", please give alien registration number: _____
City _____ State _____ Zip Code _____	
Your Cell Phone _____ Home Phone _____	

6. **CERTIFICATIONS/LICENSES: (\*Attach a copy of your certification/license to this application.)**

Title/Issuing Authority	License #	Original Date of Issue	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____

Do you possess a valid license to operate a motor vehicle in New York? Yes \_\_\_\_\_ (Class \_\_\_\_\_) No \_\_\_\_\_

7. **EDUCATION:**

High School: Do you possess a high school or equivalency diploma? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, last grade completed: \_\_\_\_\_  
Name of High School \_\_\_\_\_

College:	Name/Location	Dates Attended	Major	# of Credits	Degree Earned
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

8. **WORK EXPERIENCE: (Attach additional sheets if necessary.)**

<b>Name of Employer/Address</b> _____	<b>Title</b> _____
<b>Dates of Employment (From Mo/Yr)</b> _____ <b>(To Mo/Yr)</b> _____	<b># of hours/wk</b> _____ <b>Supervisor</b> _____
<b>Duties Performed:</b> _____	
_____	
<b>Name of Employer/Address</b> _____	<b>Title</b> _____
<b>Dates of Employment (From Mo/Yr)</b> _____ <b>(To Mo/Yr)</b> _____	<b># of hours/wk</b> _____ <b>Supervisor</b> _____
<b>Duties Performed:</b> _____	
_____	

**Affirmation and Authorization to Investigate and Release**

The undersigned applicant hereby affirms that the statements made on this application and any attached papers or documents are true under the penalties of disqualification and perjury.

The undersigned applicant hereby authorizes the Department of Human Resources of the County of Dutchess or its agents to investigate matters necessary for the verification of the qualifications of the applicant. Such authorization shall include the right to examine any and all records, files, histories or other information relating to the applicant in the possession of any federal, state or municipal authority, corporation, agent or person. Furthermore, such investigation may include a criminal background investigation, which would require a fingerprint check, to determine overall suitability for employment. Failure to meet standards for the background investigation may result in disqualification. The applicant voluntarily releases from liability all persons or entities supplying or collecting such information.

\_\_\_\_\_ Signature \_\_\_\_\_ Date