



CUYAHOGA FALLS PARKS AND RECREATION
APPLICATION FOR EMPLOYMENT
(Please Print)



Submit applications to the Parks & Recreation Department, 2310 Second Street, Cuyahoga Falls, OH 44221
Applications will be kept up to six (6) months. You will be called if your qualifications / availability meet our requirements.

Name _____ SSN# _____
Street _____
City _____ State _____ Zip _____
Phone #1 _____ Phone #2 _____
Email _____

Do you wish to work: _____ Full Time _____ Part Time _____ Temporary
Date you can begin work: _____ Can you work weekends & holidays? ___ Yes ___ No
How many hours a week are you available to work?
_____ 10-15 _____ 16-20 _____ 21-29 _____ 30-40
When are you most available to work (check all that apply)?
___ Mornings (5-10 am) ___ Afternoons (10 am-6 pm) ___ Evenings (6-11 pm)

SKILLS/CERTIFICATIONS

List special training, skills, experience and certifications: _____

EDUCATION – select number of years completed:

High School: 1 2 3 4 College: 1 2 3 4 5 6
High School _____ College _____
Technical/Trade School _____ Degree _____ Major _____

Do you have a valid State of Ohio Driver's License? ___ Yes ___ No
Do you have a Commercial Driver's License (CDL)? ___ Yes ___ No Class: A B
If yes, indicate class

GENERAL INFORMATION

Are you legally authorized to work in the United States? ___ Yes ___ No
Are you age 18 or older? ___ Yes ___ No
Do you smoke or use other tobacco products (such as chewing tobacco)? ___ Yes ___ No
Do you know of any reason why you cannot perform the essential functions of the job
for which you are applying, with or without reasonable accommodations? ___ Yes ___ No
Please describe any accommodations required: _____

Have you ever been convicted of a criminal offense? ___ Yes ___ No
(An affirmative answer will not automatically disqualify you from consideration)
Nature of offense _____ Date: _____

MARK JOB CHOICES:

PARKS

___ Park Maintenance
___ Lodge Custodian

NATATORIUM

___ Lifeguard
___ Front Desk/Operations
___ Event Staff
___ Maintenance/Cleaning
___ Certified Fitness Instructor (Group/Youth/Water)
___ General Fitness Staff
___ Kids' Castle Babysitting

WATER WORKS AQUATIC CTR

___ Admissions
___ Lifeguard
___ Concessions
___ Maintenance

RECREATION

___ Park Supervisor
___ Scorekeeper
___ Class Instructor

BROOKLEDGE GOLF

___ Grounds Crew
___ Mechanical
___ Concession/Cashier
___ Range Picker
___ Ranger/Starter

DOWNVIEW SPORTS CENTER

___ Front Desk/Operations
___ Maintenance/Range Picker

QUIRK CULTURAL CENTER

___ Front Desk/Clerical
___ Maintenance
___ Class Instructor

(OVER)

EMPLOYMENT HISTORY

Have you previously been employed by the City of Cuyahoga Falls? ___Yes ___No If yes, when? _____

List most recent place of employment first:

<u>Place of Employment / Address / Phone</u>	<u>Time Employed</u> From: To:	<u>Supervisor's Name</u>	<u>May We Contact This Employer?</u>
<u>Position Held</u>	<u>Duties</u>	<u>Reason for Leaving</u>	
<u>Place of Employment / Address / Phone</u>	<u>Time Employed</u> From: To:	<u>Supervisor's Name</u>	<u>May We Contact This Employer?</u>
<u>Position Held</u>	<u>Duties</u>	<u>Reason for Leaving</u>	
<u>Place of Employment / Address / Phone</u>	<u>Time Employed</u> From: To:	<u>Supervisor's Name</u>	<u>May We Contact This Employer?</u>
<u>Position Held</u>	<u>Duties</u>	<u>Reason for Leaving</u>	

REFERENCES

Name and Address	Occupation	Phone

I certify that the personal data I have provided in this application is accurate and I understand that the willful withholding of information or falsification of any entry may be the basis for dismissal. I hereby authorize release of any personal record of prior employment, scholastics, medical records, or records possessed by any law enforcement agency without recourse to confirm this data. If hired, I will abide by the regulations of my employer. I understand that if offered employment, I may be asked to sign an authorization for release of medical records prior to being hired by the City of Cuyahoga Falls and I must refrain from using any tobacco products for the duration of my employment with the City of Cuyahoga Falls Parks and Recreation Department.

Signature

Date

PLEASE NOTE: THE CITY PAYS BY DIRECT DEPOSIT, THEREFORE IT IS NECESSARY THAT YOU HAVE EITHER A SAVINGS OR CHECKING ACCOUNT TO BE EMPLOYED BY THE CITY OF CUYAHOGA FALLS

**Please return to:
Cuyahoga Falls Parks and Recreation
2310 Second Street
Cuyahoga Falls, OH 44221**

EO/AE The City does not discriminate on the basis of age, sex, race, or color, national origin, religion or disability.

WORK PERMIT INSTRUCTIONS

**WORK PERMIT: Every minor 14 – 17 years of age.
Must have a working permit.**

Students must obtain a work permit in the school district they attend (or would attend if they attend a private school). Work permit applications are available through the Board of Education Offices, the Guidance Offices or High School Vocational Offices, Cuyahoga Falls High School # is 330-926-3800, Woodridge Local Schools # is 330-929-3191, Stow-Munroe Falls City Schools # is 330-689-5309, Akron Public Schools # is 330-761-2731 and Tallmadge Public Schools # is 330-633-3291. The “Age & Schooling Certificate” must be signed by the student when he/she returns the completed work permit. If you have questions regarding the law, you may call the Ohio Department of Commerce at 1-614-644-2239.

The work permit has three sections that must be completed and returned before the permit can be processed. These sections are:

1. **Parental Consent** – This section must be signed by the custodial parent or legal guardian before the permit may be processed. **PLEASE TAKE** your certified birth certificate with you.
2. **Pledge of Employer** – The employer must complete this section and sign where appropriate. The “specific nature of employment” must be clearly stated.
NOTE: The exact hours must be entered. The term “varies” is not acceptable.
3. **Physician’s Certificate** – A physical is required before the permit may be issued. Physicals are valid for a period not to exceed one year from the date of issuance.

When all three sections of the application are completed, return it to the Board of Education Office, **IN PERSON**, so that you may sign the Age & Schooling Certificate. You should not be scheduled for work until your permit has been processed. However, if your employer requires proof that your application is being processed, a letter stating this may be obtained from the Pupil Services Department at the Board of Education Office.

NOTE: The work permit is valid only for the employment for which it was processed. A new work permit is required for each new employer.

If you are not 18 years of age, but have graduated from high school, you do NOT need a work permit.

Any questions regarding your work permit application and requirements may be directed to the Board of Education Offices within your school district.



REVISED: 6/2009