

# PART-TIME SEASONAL APPLICATION



RETURN TO: Attn: \_\_\_\_\_  
 Division of Recreation and Community Services  
 5225 W. Vliet Street, Room 56 – Milwaukee, WI 53208

MPS EMPLOYEE ID # \_\_\_\_\_ (if available)

SOCIAL SECURITY # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**MPS Employees must live in the City of Milwaukee:**

**Do you currently live in the City of Milwaukee?**

YES  NO

**Check all Positions you are Interested in Applying for:**

- |                                                           |                                                             |
|-----------------------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Aquatics                         | <input type="checkbox"/> Outdoor Educ / Environmental Educ  |
| <input type="checkbox"/> Before & After School Child Care | <input type="checkbox"/> Performing / Visual Arts           |
| <input type="checkbox"/> Community Centers                | <input type="checkbox"/> Playgrounds                        |
| <input type="checkbox"/> Field Attendant                  | <input type="checkbox"/> Sports Official                    |
| <input type="checkbox"/> Instructor (Adult)               | <input type="checkbox"/> Summer Recreation Enrichment Camps |
| <input type="checkbox"/> Instructor (Youth)               | <input type="checkbox"/> Therapeutic Recreation             |
|                                                           | <input type="checkbox"/> Youth Sports                       |

**Are you currently a MPS employee?**

Yes  No

If YES, what position and school / location:

**Are you 18 Years of age or over?**

YES  NO

**INSTRUCTIONS:** Print answers in INK. Date and sign the application on the reverse side.

**Telephone #s**

Last Name	First Name	MI	Cell / Mobile Phone:
Former Names Used:			Home:
Address	City / State	Zip	Work / Business:
Email: _____@_____			

**EDUCATION AND TRAINING:** List high school attended. If you did not graduate, but have passed the GED test, indicate the date passed. Then list university, college, technical, military or other training you have received in chronological order.

NAME AND LOCATION OF INSTITUTION	DATES ATTENDED		GRADUATED?		DEGREE
	From	To	Yes	No	

**MOST RECENT WORK EXPERIENCE:** (Paid or Volunteer)

DATES OF EMPLOYMENT		POSITION HELD	PLACE OF EMPLOYMENT (NAMES, ADDRESS, PHONE OF CONTACT PERSON)
From	To		

**REFERENCES:** (Other than relatives)

NAME	ADDRESS	TELEPHONE	RELATIONSHIP

**MILWAUKEE PUBLIC SCHOOLS IS REQUIRED TO UPDATE CRIMINAL BACKGROUND RECORDS ON EACH EMPLOYEE.**

YES  NO  Have you ever been convicted of or paid a fine for any offense or currently subject to any pending charge(s), including felonies, misdemeanors and ordinance violations? (Do not report minor traffic violations.)

If Yes, in the space below, please list the details of each offense, including the specific offense, the date of the offense, the location, and the disposition of the case (attach additional sheets, if necessary).

**NOTE: Convictions and pending charges are not an automatic bar to employment, but are reviewed in relation to the job for which you applied.**

**CONVICTED OFFENSE and/or PENDING CHARGES:**

DATE	LOCATION	CHARGE	COURT	DISPOSITION OF CASE

I certify that all statements made on this application are true, complete, accurate and not misleading to the best of my knowledge. I understand that any false or incomplete statements or misrepresentations may subject me to disqualification or dismissal. I further understand that after I am hired and during my employment, I am responsible for notifying the Director of Recreation or his/her designee of any convictions or pending charges involving criminal offenses, including felonies, misdemeanors and ordinance violations.

**APPLICANT SIGNATURE** \_\_\_\_\_

**Date** \_\_\_\_\_

**NOTE: FILLING OUT THIS APPLICATION DOES NOT GUARANTEE AN ASSIGNMENT!**

OVER → →

Last Name _____	First Name _____
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**DAYS and TIMES AVAILABLE for WORK:** EARLIEST DATE AVAILABLE TO START \_\_\_\_\_

DAY:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
MORNING HOURS:	_____	_____	_____	_____	_____	_____	_____
AFTERNOON HOURS:	_____	_____	_____	_____	_____	_____	_____
EVENING HOURS:	_____	_____	_____	_____	_____	_____	_____

Yes \_\_\_\_\_ No \_\_\_\_\_ Are you related (by blood or marriage) to a current MPS part-time, or full-time recreation employee? (This includes guardianships as well as legal adoptions.) If yes, list individual name(s), relationship & work location(s). \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ Are you a student? School \_\_\_\_\_ Year \_\_\_\_\_ Major \_\_\_\_\_

**SKILLS / ABILITIES:** *Of the following activities, I have had special training, worked with and/or could teach special interest groups as checked:*

- \_\_\_\_\_ Adult Education (Subject \_\_\_\_\_)
- \_\_\_\_\_ Arts / Crafts
- \_\_\_\_\_ Cheerleading / Pom Pons
- \_\_\_\_\_ Computers (Type \_\_\_\_\_)
- \_\_\_\_\_ Creative Dramatics
- \_\_\_\_\_ Dance (Type \_\_\_\_\_)
- \_\_\_\_\_ Individuals with Disabilities
- \_\_\_\_\_ Foreign Language (Type \_\_\_\_\_)
- \_\_\_\_\_ Math
- \_\_\_\_\_ Music (Type \_\_\_\_\_)
- \_\_\_\_\_ Playground Games
- \_\_\_\_\_ Outdoor Education (Environmental Education)
- \_\_\_\_\_ Reading
- \_\_\_\_\_ OTHER Special talents not listed: \_\_\_\_\_

**Which age groups do you prefer to work with?**

- Pre School       Elementary       Middle School
- High School       Adults       Senior Citizens

SPORTS	Coach (✓)	Official (✓)	Other (Explain)
Baseball / T-Ball			
Basketball			
Gymnastics			
Soccer			
Softball			
Tennis			
Track			
Volleyball			

**CERTIFICATIONS:** *(Please check (✓) those that apply)*

- (CPR) Cardiopulmonary Resuscitation      Expiration Date: \_\_\_/\_\_\_/\_\_\_
- First Aid      Expiration Date: \_\_\_/\_\_\_/\_\_\_
- Lifeguard Training      Expiration Date: \_\_\_/\_\_\_/\_\_\_
- Water Safety Instruction      Expiration Date: \_\_\_/\_\_\_/\_\_\_

↓ FOR OFFICE USE ONLY ↓

WINTER     SPRING     SUMMER     FALL - YEAR 20\_\_\_\_\_

**NEW RECREATION EMPLOYEE**

Job Title _____	Job Classification: Recreation Leader <input type="text"/>
Location & Address _____	Starting / Ending Dates _____
Rate of Pay _____ Day(s) _____	Hour(s) _____

Job Title _____	Job Classification: Recreation Leader <input type="text"/>
Location & Address _____	Starting / Ending Dates _____
Rate of Pay _____ Day(s) _____	Hour(s) _____

**INSERVICE 1**

Location \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

**INSERVICE 2**

Location \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

**INSERVICE 3**

Location \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Initial / Date Received	Sent To / Date Sent	Comment(s):
_____	_____	_____
_____	_____	_____
_____	_____	_____

OVER → →

