



READINGTON RECREATION SUMMER CAMP

INFORMATION FOR 2025 SUMMER CAMP APPLICANTS

Thank you for your interest in working at Readington Recreation's Summer Camp!

Before you apply for a position with us, please familiarize yourself with the following expectations of camp employees:

- Summer Camp will be held from June 25 through August 1, 2025, with a mandatory training day the week prior. There will be no camp on July 4.
- Camp is open from 8:00am to 3:00pm, and counselors must be able to work shifts they are scheduled for during those times. Depending on camp enrollment, staff are scheduled to work up to 30 hours per week.
- Counselors must make the full six-week commitment to work camp. Because of the nature of the camp program, extended vacations and leaves of absence cannot be granted or accommodated. Please include any concerns you have with this requirement in your application.

Here are some things to consider when deciding whether to return this summer:

- *Do I have another job or other summer activities that will conflict with this camp?*
 - Please consider your options carefully and be sure of your decision. Changing your mind after you accept the position creates a challenge for us to organize a well-run camp for the children in Readington. Employment at camp is a commitment.
- *Why should I work at camp?*
 - If you've ever attended the Readington Recreation summer camps, then you know it is a great program. Counseling is very rewarding. Camp provides a work experience that is desirable to colleges and future employers. Leadership, communication, problem solving, and human relations are all skills learned while being a camp counselor.

If you can meet these conditions, we look forward to receiving your application for a position at Readington Recreation.

Please send your application (both the Township application and camp supplement)
To **Dina Fornataro**, CPRP, Assistant Director of Recreation
by email to asstrecdirector@readingtontwp-nj.gov
or by mail to **509 County Road 523, Whitehouse Station, NJ 08889**.

Applications accepted February – April

Deadline to apply is May 1

Interviews in March – May

Job offers on a rolling basis

Mandatory training day is TBD

First day of camp is June 25

Readington Recreation reserves the right to interview and hire qualified applicants prior to this schedule.



READINGTON RECREATION SUMMER CAMP CAMP SUPPLEMENTAL APPLICATION

Applicant Name: _____

Applicant Cell Phone: _____

Applicant Email _____

Please answer the following questions.

Describe your experience in working with children in a group setting.

Recall a challenging situation working with children. How did you handle it? What did you learn?

What special or unique talent(s) do you have that will enhance the Readington Recreation Summer Camp?

Please list any additional information such as certifications, completed classes pertaining to working with youth, or any comments we should know when considering your application.

Application For Employment



Readington Township
509 Route 523
Whitehouse Station, NJ 08889

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:	Date of Application
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How Did You Learn About Us?

Advertisement
 Friend
 Walk-In
 Employment Agency
 Relative
 Other:

Last Name	First Name	Middle Name
Address <i>Number</i> <i>Street</i>	<i>City</i>	<i>State</i> <i>Zip Code</i>
Telephone Number(s)	Date of Birth	Social Security Number

- If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No
- Have you ever filed an application with us before? If Yes, give date Yes No
- Have you ever been employed with us before? If Yes, give date Yes No
- Are you currently employed? Yes No
- May we contact your employer? Yes No
- Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
Proof of citizenship or immigration status will be required upon employment. Yes No
- On what date would you be available for work?
- Are you available to work: Full Time Part Time Shift Work Temporary
- Are you currently on "lay-off" status and subject to recall? Yes No
- Can you travel if a job requires it? Yes No
- Have you been convicted of a felony within the last 7 years?
Conviction will not necessarily disqualify an applicant from employment. Yes No

If Yes, please explain— — — — —

	Elementary School	High School	Undergraduate College/University	Graduate/Professional
School Name and Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills and extra-curricular activities.				
Describe any honors you have received.				
State any additional information you feel may be helpful to us in considering your application.				

Indicate any foreign language can speak, read and / or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.
You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

References

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1.
2.
3.

Have you ever had any Job-related training in the United States military? Yes No
 If yes, please describe

Are you physically or otherwise unable to perform the duties of the job for which you have applied? Yes No

Education

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)		Hourly Rate/Salary	
Job Title	Supervisor		
Reason for Leaving	Starting	Final	
2. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)		Hourly Rate/Salary	
Job Title	Supervisor		
Reason for Leaving	Starting	Final	
3. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)		Hourly Rate/Salary	
Job Title	Supervisor		
Reason for Leaving	Starting	Final	
4. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)		Hourly Rate/Salary	
Job Title	Supervisor		
Reason for Leaving	Starting	Final	

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks -----

INTERVIEWER

DATE

Employed Yes No

Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Department'-----

By _____

== _____
NAME AND TITLE

DATE

NOTES _____

