

KENNETH J. HOPKINS  
MAYOR



RAY TESSAGLIA  
DIRECTOR

## CRANSTON PARKS AND RECREATION APPLICATION FOR SUMMER EMPLOYMENT 2024

**Proof of Age:** Birth Certificate \_\_\_\_\_ Driver's License \_\_\_\_\_ (Please Attach Copy of One)  
**\*Applicant MUST be at least 16 years old at the time of employment (by July 1, 2024)\***

**POSITION APPLYING** (You can choose more than one):

**PLAYGROUND COUNSELOR** \_\_\_\_\_ **SPLASH PAD ATTENDANT** \_\_\_\_\_

**NAME** \_\_\_\_\_ **SOCIAL SECURITY #** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
Street City Zip Code

**TELEPHONE #** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**EDUCATION:** Highest grade completed (June this year) \_\_\_\_\_

**ARE YOU CURRENTLY CPR CERTIFIED?** YES \_\_\_\_\_ NO \_\_\_\_\_

CERTIFICATION IS NOT A PRE-REQUISITE FOR EMPLOYMENT, HOWEVER IT WILL BE REQUIRED AS A CONDITION OF YOUR EMPLOYMENT TO BE PROVIDED BY THE CITY. IF YES, PROOF OF CERTIFICATION IS REQUIRED WITH RE-APPLICATION

**Are you able to work full time 35 – 40 hours per week?** YES \_\_\_\_\_ NO \_\_\_\_\_

**If no, please list dates not available:** \_\_\_\_\_

**STATE QUALIFICATIONS FOR ABOVE POSITION(S).** Include any involvement in after school activities/sports, community activities/organizations, etc. Attach additional sheet or use the reverse side of this form if extra space is needed. (Please print)

**PLEASE RETURN THIS COMPLETED APPLICATION NO LATER THAN MAY 24, 2024 TO:**

**CRANSTON PARKS AND RECREATION, 155 GANSETT AVENUE, CRANSTON, 02910**  
**Email: [ssevegny@cranstonri.gov](mailto:ssevegny@cranstonri.gov)**