



## Orange Community Education & Recreation

Orange City Schools  
32000 Chagrin Blvd., Pepper Pike, Ohio 44124  
216-831-8601 [www.orangerec.com](http://www.orangerec.com)

### EMPLOYMENT APPLICATION

Since its inception as an integral part of the Orange City Schools in 1973, Orange Community Education and Recreation has emerged as a state and national community education model. This division develops, coordinates and staffs year-round, comprehensive, enrichment and recreational opportunities and services to the entire district. Enrichment classes and activities offered include programs for preschoolers, youth, childcare, teens, adult continuing education, adult and youth sports, senior adult services and aquatics. The department serves the communities of the Orange School District and its surrounding communities.

*"Orange Community Education & Recreation embraces the quality principles and practices of collaboration, community involvement, innovation, accountability and teamwork in developing and coordinating lifelong educational, enrichment, recreational and leisure opportunities for all participants."*

Date \_\_\_\_\_

Name \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Email \_\_\_\_\_ Social Security # \_\_\_\_\_

Position for which you are applying: (check one):

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> Instructor    | <input type="checkbox"/> Open Door Staff | <input type="checkbox"/> Custodial      | <input type="checkbox"/> Other (Please specify) |
| <input type="checkbox"/> Clerical      | <input type="checkbox"/> Lifeguard       | <input type="checkbox"/> Camp Counselor | _____   |
| <input type="checkbox"/> Program Staff | <input type="checkbox"/> Concession      |   |   |

Check one:

- Full Time       Part Time       As Needed       Volunteer

Do you have a valid driver's license?  Yes  No

Have you ever served in the U.S. Military?  Yes  No      Years of Service \_\_\_\_\_

Branch \_\_\_\_\_ Assignment \_\_\_\_\_

## Work Experience

List most recent first.

Dates	Employer Name	Employer Address	Position/Title	Reason for Leaving

## Education

Level of Education	School Name	Dates Attended	Highest Level Completed / Graduation	Degree
High School				
College				
Graduate Work				
Other Certificates/ CEUs				
Other Certificates/ CEUs				

## Employment References

List three recent employer references:

Name	Address	Phone	Company	Position

## Personal References

List three personal references, not related to you, who have knowledge of your character, personality and general ability

Name	Address	Phone	Occupation

List any professional organizations to which you belong; awards you have received; publications, etc.

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List any volunteer experience or community involvement in community education, recreation, or leadership position (church/synagogue, school, recreation, camp, lifeguard, etc.)

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How did you hear about this position?

- Newspaper       Friend: \_\_\_\_\_  
 Job Posting       Other: \_\_\_\_\_

## Read carefully before signing:

In accordance with Federal Law, any person employed by this District must provide evidence that s/he is eligible to work in the United States and applicants must be 14 years of age and obtain a work permit before they may be employed.

EOE: It is the policy of this District that no candidate for a position in this District shall be discriminated against on the basis of race, color, religion, national origin or citizenship status, creed or ancestry, age, gender, marital status, non-disqualifying disability, height or other protected categories.

My signature attests both to the fact that the information I have provided herein is correct and to my understanding that falsification of information shall be grounds for not considering this application or for dismissal if employed.

I authorize all persons listed as "references" on this application to provide a personal evaluation of my abilities and potential for the position for which I am a candidate. I acknowledge that this information is confidential and shall remain confidential and I waive my right of access to any information received.

I certify that all statements on this application are true and complete. I understand that false or incomplete statements may result in disqualification or dismissal.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_