

2012 SUMMER SCHOOL SUPPORT STAFF APPLICATION

Summer School Dates: June 20 through July 18, 2012 – No School on July 4

I. PERSONAL DATA

Date _____

Full Name: _____ Email: _____
Last First Middle

Address: _____
Street City State & Zip

Telephone: Home: _____ Cell: _____ Social Sec. # (optional) _____

Did you work for our Summer School Program in 2011? Yes No
How many years have you worked Summer School in Watertown? _____
What job position did you hold in Summer School 2011: _____

Do you want to work: Morning (until 11:30) Afternoon Full Day (until 2:30)

Have you been employed as a Watertown District Employee? yes no When _____

Have you had CPR training within the last year? yes no Date _____

Have you had First Aid training within the last 3 years? yes no Date _____

II. WORK EXPERIENCE

| From-To | Employer | City | Work Done | Supervisor |
|---------|----------|------|-----------|------------|
|---------|----------|------|-----------|------------|

Have you ever been released from employment? Yes No Where? _____

Reason _____

VI. REFERENCES (Use only individuals familiar with your work)

| Name | Position | Address | Phone |
|------|----------|---------|-------|
|------|----------|---------|-------|

VI. Briefly state what you feel your personal contribution to the Watertown School District Summer School Program will be:
