



**Manchester-by-the-Sea**  
 Parks & Recreation Department  
 10 Central Street, Manchester, MA 01944  
 Phone: 978-526-2019 Fax: 978-526-2007  
 www.manchester.ma.us

**Counselor-In-Training / Volunteer Application**

Name:	First	Last			Soc. Sec. #
Address:	Street	City	State	Zip	Telephone:

Position(s) applied for: \_\_\_\_\_

If your application is considered favorably, on what dates would you be available for work? \_\_\_\_\_

Are you available for the entire summer? (Late June – Mid August): \_\_\_\_\_

**EMPLOYMENT/VOLUNTEER EXPERIENCE**

(Please begin with most recent experience.)

1. Company/Employer Name	Dates Employed From: _____ To: _____	Position
Address/Phone	Supervisor	Reason for leaving
2. Company/Employer Name	Dates Employed From: _____ To: _____	Position
Address/Phone	Supervisor	Reason for leaving

**EDUCATION**

Name and Address of School	Grade Completed (as of 6/30/2010)

**REFERENCES:**

Please provide the names of three (3) people (not related to you) who can attest to your ability to perform the duties/position for which you are seeking employment.

Name	Address	Phone #	How They Know You

