



# City of Camden

2021

## Seasonal Adult Employment Application

Print information in ink. Please include all information required, even if listed in your resume.

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(OFFICIAL CARD MUST BE PRESENTED)

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cellular Phone #: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

U.S. Citizen: \_\_\_\_\_ If NOT, Visa # and expiration date: \_\_\_\_\_

### POSITION APPLYING FOR

Pool Positions: \_\_\_\_\_ Pool Aide \_\_\_\_\_ Pool Coordinator \_\_\_\_\_ Pool Supervisor \_\_\_\_\_ Lifeguard  
Recreation Positions: \_\_\_\_\_ Recreation Aide \_\_\_\_\_ Recreation Supervisor

Minimum Salary: \_\_\_\_\_ Date Available: \_\_\_\_\_

### EDUCATION

Highest Grade Completed: (K-12) \_\_\_\_\_ Diploma/G.E.D. \_\_\_\_\_ Yes \_\_\_\_\_ No

Trade Schools Attended: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Major: \_\_\_\_\_

Colleges Attended: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Major: \_\_\_\_\_

State any additional information you feel may be helpful to us in considering your application:

\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT HISTORY

Are you currently employed?  Yes  No  
If YES, list current employer; If NO list last employer (You may attach a resume)

Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

(IF NO LONGER EMPLOYED) Reason for Separation: \_\_\_\_\_

(Attach additional sheet if necessary)

Have you previously work for the City of Camden?  Yes  No

If yes, Job Title: \_\_\_\_\_ When: \_\_\_\_\_

### References

Please give the name, address and telephone number of three professional references who are *not* related to you:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Special Skills and Qualifications

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

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## CERTIFICATIONS

I now certify to the best of my knowledge and belief, that all of my statements are true and made in good faith.

I hereby authorize the City of Camden to request from law enforcement agencies, or other relevant entities, any information pertaining to my background deemed necessary in determining my suitability for employment. I also release said parties from any and all responsibility in supplying the requested information.

I understand that upon an offer of employment, I must undergo a physical examination including drug screening. By failing these examinations, the offer of employment will be withdrawn. I understand that my employment as a temporary employee does not entitle me to benefits extended to regular employees. These include health, pension, leave time, compensation time and holidays.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*"An Equal Opportunity Employer"*  
*For Human Services Use ONLY*

Received By: \_\_\_\_\_ Date: \_\_\_\_\_



# City of Camden

## Seasonal Employment Application Application Instructions

Dear Applicant,

The City of Camden offers a wide variety of activities for city residents through our summer recreation programs. As a result, we have many opportunities for seasonal summer employment.

Minimum Qualifications for Employment:

- Must be at least 18 years of age.
- Must be available to work up to 8 weeks (Monday – Friday) between July 6<sup>th</sup> – August 28<sup>th</sup>, 2021.
- High School Diploma or G.E.D Preferred

Complete each section of the attached application fully. Review all of the information to ensure it is correct. Resumes will be accepted as supplemental information, however do not write "see resume" in response to questions on the application. Failure to complete the application and essay questions thoroughly could result in disqualification from the review process.

**All forms require a signature and must be submitted by email due to Covid-19.**

Return completed applications to:

City of Camden  
Department of Human Services  
Bureau of Recreation & Youth Services  
1000 N. 6<sup>th</sup> Street  
Camden, New Jersey 08102  
Phone: (856) 757-7285 or (856) 968-6444  
Email: [HumanServices@ci.camden.nj.us](mailto:HumanServices@ci.camden.nj.us) or [MaHunter@ci.camden.nj.us](mailto:MaHunter@ci.camden.nj.us)

**Applications will be accepted and considered complete ONLY if each of the following items are submitted:**

- Complete employment application
- Copy of two forms of identification:
  - Social Security Card
  - New Jersey Driver's License or State/County ID

Application must be legible, complete and signed. Resumes are optional, but will not be accepted in lieu of an application.

Applicants may be required to undergo a personal interview.

Potential adult hires are required to pass a physical, drug screening and criminal background check.

**All applications must be received by Friday, May 21, 2021**

Above requirements are necessary for consideration for employment only, obtaining the above requirements does not guarantee employment.

**\*Due to COVID 19: events, programing, funding and hiring are subject to change.**

AFFIDAVIT OF RESIDENCE OF  
EMPLOYEE OF CITY OF CAMDEN  
(CITY RESIDENT)

STATE OF NEW JERSEY )

SS:

COUNTY OF CAMDEN )

I, \_\_\_\_\_, of full age, being duly sworn upon my oath  
(PRINT YOUR NAME)

according to law, depose ad say:

1. I am an employee of the City of Camden, My present position is  
\_\_\_\_\_  
(POSITION APPLYING FOR)

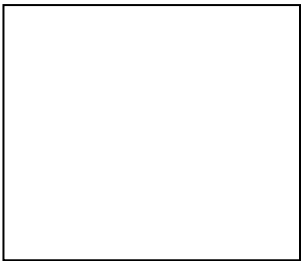
2. I am a permanent resident of the City of Camden. My permanent home  
address is \_\_\_\_\_, Camden, New Jersey, this meaning the  
(PRINT YOUR ADDRESS)

place at which I and my family live, and where I now intend to remain.

3. I am aware that Ordinance MC-1760 requires, as a condition of my  
employment, that I maintain my permanent residence and home in the City of Camden as  
long as I remain a City employee, unless specifically exempted under Section 1(c) thereof.

\_\_\_\_\_  
(Signature)

Sworn and Subscribed to  
Before me this \_\_\_\_day  
of \_\_\_\_\_2021



## 2021 CONSENT TO PARTICIPATE & COVID-19 ACKNOWLEDGMENT

The **CITY OF CAMDEN** offers the public the option to participate in our 2021 Summer Food Service Program (SFSP) Program & 2021 Summer Pool Program which is held within or near the **CITY OF CAMDEN** property and other public and semi-public places accessible to large numbers of people on a daily basis.

Due to COVID 19 pandemic, your agency wishes to participate in our 2021 SFSP/2021 Pool Program, must complete, sign and return this Acknowledgment Form to the Department of Human Services Representative before participating in the 2021 SFSP/Pool Program. Participating in the 2021 SFSP/Pool is conditioned upon timely submittal of a completed Acknowledgment Form.

### ACKNOWLEDGMENT

I/We acknowledge that I/We have been provided with, read and fully understand this Acknowledgment Form, the Center for Disease Control's ("CDC") Poster Follow these 5 Safety Steps, the CDC's Poster on Symptoms of Coronavirus (COVID-19), and the New Jersey Department of Health's ("NJDOH") information and guidelines regarding COVID-19 and Multisystem Inflammatory Syndrome in Children ("Pandemic Illnesses"). The city of Camden's COVID-19 Prevention Plan for 2021 is available for review.

I/We further acknowledge that the Pandemic Illnesses: (1) highly contagious and may cause serious permanent bodily injury, including death, of healthy persons of all ages; (2) are subject to changing recommendations on limiting risk of exposure and spread; (3) remain prevalent throughout New Jersey; (4) are highly likely to spread to persons in direct contact with or in close proximity to (within about 6 feet) an infected person; (5) believed by the CDC/NJDOH to spread by droplets produced into the air when an infected person coughs, sneezes, talks or otherwise moves air out through their nose and mouth, and from touching surfaces on which droplets containing the virus exist.

I/We further acknowledge that working, attending or participating in the 2021 SFSP/2021 Pool Program poses an inherent and heightened risk of exposure, infection and bodily injury from the Pandemic Illnesses regardless of preventative measures taken by the **CITY OF CAMDEN and your agency**.

I/We further acknowledge that we will operate in accordance with the Guidelines of the CDC, the NJDOH and any Executive Orders issued by the New Jersey Governor Philip D. Murphy designed to prevent the spread of COVID-19. We acknowledge and agree to assume all risks and waive and release all claims for personal injuries and property damages arising from an accidental exposure to SARS-CoV-2, COVID-19, MIS-C and other Pandemic illnesses at the **CITY OF CAMDEN** facility/property.

This WAIVER does not supersede, circumvent or cancel the **CITY OF CAMDEN'S** Rules and Regulations for SFSP and Pool Program Operations.

If any part of this WAIVER is found by a court of competent jurisdiction to be invalid, the remainder of this WAIVER shall nevertheless remain in full force and effect and the offending provision or provisions severed here from.

I, \_\_\_\_\_ (hereinafter "I/"), acknowledge and represent that I am seeking to work with the City of Camden during Covid-19 of my own free will.

Applicant Name (Print)

(Signature)

Date