

2023 Summer Student Application

Name:				
Address:				
Phone Number:	Email:	Email:		
Current Education Status:				
Upcoming Education Plan (2022-2023):				
First Aid Certified:				
Check the box of the position(s) applying for:				
Summer Administrative Assistant Responsible to provide administrative support Recreation Program Coordinator. Job duties will	t to Recreation Department and other departments as assigned by the l vary depending on the task assigned.			
Summer Program Co-ordinators Responsible for the supervision of all playground arises and coordinate/supervise special events a	d staff, parent & tot leaders and playground sites. Act as a leader if the need and projects.			
Camp Leaders Responsible for the supervision of all children, e develop lesson plans and daily activities for the	equipment and playground sites. Assist with special events and projects and children enrolled in the program.			
Parent & Tot Soccer Leaders (Spring) Responsible for compiling activities and drills for and tots during lessons.	r parent and tot soccer. Be actively present on the field coaching both parent			
Ball Hockey Leaders (Spring) Responsible for compiling drills and lesson plan	ns and monitoring scrimmage games.			
access swimming programs. Assume all instru	Ities as well as, ensure adequate coverage while patrons are attending public uctional responsibilities and duties for any and all registered instructional the Lifesaving Society standards. Responsible for performing daily/nightly			
Sign and return with resume to:				
In person at: Town of Deep River 100 Deep River Road, P.O. Box 400 Deep River ON KOJ 1P0	By email: townmail@deepriver.ca Subject line should read: Private & Confidential Student Position			
In signing this application, I understand that any disqualify me from my employment or cause my	misrepresentation or false information on this application form or resume r immediate dismissal.	nay		
Signature:	Date:			

Thank you for your interest in the Town of Deep River. Only applicants selected for an interview will be contacted. Accessibility accommodations are available for all parts of the selection process. Applicants must make their needs known in advance. Information collected will be managed in accordance with the Municipal Freedom of Information and Protection of Privacy Act.

Section 2

(To be completed for Aquatic applications only)					
	Date of Original	Date of last Re-	Certification I.D.		
	Certification	certification	Number		
Bronze Cross					
Standard First Aid - Level "C"					
NLS - Pool					
NLS - Waterfront					
Red Cross Water Safety					
Instructor					
Lifesaving Instructor					
Lifesaving Examiners					
I Can Swim Instructor					
Aqua fitness Instructor					
Please specify any additional					
awards or certifications					
Copies of all certifications must accompany this application.					
I certify that the above information is a true and accurate account of my aquatic qualifications.					
Signature:	Date:				
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