

Youthscapers

2019 APPLICATION FOR EMPLOYMENT

Brookline Teen Center

40 Aspinwall Ave. Brookline, MA 02446
(617) 396-8349 www.brooklineteencenter.org

Applicants must be Brookline residents OR attend a Brookline school.
Applicants must be 14 or older.

POSITION (circle one): Youthscaper Supervisor (18+)

Last Name	First Name	Middle
Address		
Address #2		
City	State	Zip Code
Date of Birth (Month, Day, Year) :		

Email (write clearly!)
Home telephone () Cell phone ()

SCHOOL	NAME AND LOCATION OF SCHOOL	NUMBER OF YEARS COMPLETED
High School		
Other		

What days and times are you available? (Youthscapers hours are 9:00am - 6:00pm)

M: ___ to ___ **T:** ___ to ___ **W:** ___ to ___ **Tr:** ___ to ___ **F:** ___ to ___

Please indicate any days you may be on vacation/unavailable this summer:

Dates: _____

***Anytime away will not disqualify you from being considered for employment.**

EMPLOYMENT HISTORY

Begin with your most present or recent jobs. Please include any volunteer work you have done.

If you have attached a resume, please leave blank.

Company Name	Telephone ()
Town and State	Employed From To
Name of Supervisor	Weekly pay Start Last
Job Title	Reason for leaving?
Brief description of responsibilities	

REFERENCES Please provide **two** professional or personal references.

1. Name:	Phone:
Organization/Title:	Email:
How do you know this person?	
2. Name:	Phone:
Organization/Title:	Email:

Is there anything else we should know about your qualifications or experience? If yes, please explain.

Applicant signature: _____ Date: _____