

Department of Parks and Recreation 198 N. Washington St. Rome, NY 13440 2023 Kennedy Civic Arena Application

City of Rome

Jeffrey M. Lanigan Mayor

Please fill out application <u>completely</u>. Application Deadline: 4:00pm Friday, September 13, 2024. Please Pick-up & Return Applications to Recreation Department Incomplete or late applications may not be accepted.

| Name: | | | | | | |
|---|----------------|-------------------|---------|---------------|--|--|
| Address: | | | | | | |
| Cell Phone: _ | | | | | | |
| Email: | | | | | | |
| Date of Birth: _ | | | | | | |
| Age (Applicants | <u>must</u> be | 16 as of Sept. 1, | 2024) _ | | | |
| Do you have a NYS Driver's License:yes no | | | | | | |
| T-Shirt Size (circle one): S M L XL XXL | | | | | | |
| CPR certified? yes no exp. date | | | | | | |
| First aid certified? yes no exp. date | | | | | | |
| High School | . <u>Year</u> | <u>Major</u> | Ave. | Grad. Date | | |
| . <u>College/Othe</u> <u>r</u> | <u>Year</u> | <u>Major</u> | Ave. | Grad. Date | | |
| Do you have wo | rking pap | pers if needed? _ | yes | no | | |
| Do you have trai | nsportatio | on? yes | no | | | |
| Have you been convicted of a felony? ves no | | | | | | |

| Position applying for: (Please mark all that apply) | | | | | |
|---|--|--|--|--|--|
| Arena Attendant: | | | | | |
| Concession Staff: | | | | | |
| Zamboni/Supervisor: | | | | | |
| Can you Ice Skate?yes no | | | | | |
| Hours & Days Available | | | | | |
| Weekdays: | | | | | |
| Time Available: | | | | | |
| Weekends: | | | | | |
| Time Available: | | | | | |
| Arena Experience: (Please mark all that apply and describe your experience) Previous arena employee: yesno | | | | | |
| Ice Hockey: | | | | | |
| Concession Sales: | | | | | |
| Cooking & Prep: | | | | | |

WORK HISTORY & EXPERIENCE

| <u>Employer</u> | Supervisor | <u>Dates</u> | Job Duties | Reason for Leaving |
|-----------------|------------|--------------|------------|-----------------------|
| Employer | Supervisor | <u>Dates</u> | Job Duties | Reason for Leaving |

CLUBS/LEADERSHIP EXPERIENCE:

Please list any and all clubs, organizations, leadership, recreation or sports experience that may be applicable:

REFERENCES

| Name | Address | Phone |
|------|---------|-------|
| 1. | | |
| | | |
| 2. | | |
| | | |
| 3. | | |
| | | |