



## APPLICATION FOR SUMMER EMPLOYMENT

### CITY OF SEA ISLE CITY

233 JOHN F. KENNEDY BLVD., 2<sup>ND</sup> FLOOR  
SEA ISLE CITY, NJ 08243  
(609) 263-4461

PLEASE PRINT

TODAY'S DATE: \_\_\_\_\_

NAME:	_____
HOME ADDRESS:	_____
CITY, STATE, ZIP:	_____
SUMMER ADDRESS IF APPLICABLE:	_____
CONTACT NUMBER:	_____
SUMMER PHONE #:	_____

DO YOU HAVE A CURRENT DRIVER'S LICENSE: \_\_\_\_\_ IF YES, DO YOU HAVE CDL: \_\_\_\_\_

DRIVER'S LICENSE: \_\_\_\_\_ (STATE) \_\_\_\_\_ (DRIVER'S LICENSE NUMBER)

HIGHEST LEVEL OF EDUCATION: \_\_\_\_\_

HAVE YOU PREVIOUSLY WORKED FOR THE CITY: \_\_\_\_\_ IF YES, GIVE DATES: \_\_\_\_\_

DATES YOU ARE AVAILABLE TO WORK: (FROM) \_\_\_\_\_ (TO) \_\_\_\_\_

REASON FOR SUMMER EMPLOYMENT AND ALSO LIST LOCAL REFERENCES:

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

WHICH DEPARTMENT(S) ARE YOU INTERESTED IN SUMMER EMPLOYMENT: (CHECK BELOW)
PUBLIC WORKS _____ BEACH TAG _____ LIFEGUARDS _____ RECREATION _____

THE CITY OF SEA ISLE CITY IS AN EQUAL OPPORTUNITY EMPLOYER