



TOWN OF HINGHAM EMPLOYMENT APPLICATION

POSITION(S) APPLIED FOR (check all that apply):

Summer Camp Counselor

Lifeguard

Summer Camp CIT

NAME: _____
Last Name First Name

ADDRESS: _____

TELEPHONE: _____
Home Cell

EMAIL ADDRESS: _____

Best time to contact you at home: _____

Do you have any relatives who work for the Town: _____

Have you ever been employed by us before? If yes, when: _____

Have you ever been employed by a public agency or municipality in Massachusetts? If yes, where and when:

Are you currently employed: _____ May we contact you at work: _____

Are you prevented from lawfully becoming employed in this country because of Visa or immigration status?

Proof of citizenship or immigration status will be required upon employment. _____

EDUCATION

| | Name & Address | Course of Study | Years Completed | Degree |
|-----------------------|----------------|-----------------|-----------------|--------|
| High School | | | | |
| College | | | | |
| Graduate/Professional | | | | |
| Other | | | | |

EMPLOYMENT HISTORY

Please account for the last 4 positions you have held. We (____)may/(____)may not contact your present employer

| | |
|------------|--------------------|
| Employer | Address |
| Telephone | Title |
| Supervisor | Dates Worked |
| | Reason for Leaving |

| | |
|------------|--------------------|
| Employer | Address |
| Telephone | Title |
| Supervisor | Dates Worked |
| | Reason for Leaving |

| | |
|------------|--------------------|
| Employer | Address |
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| | Reason for Leaving |

| | |
|------------|--------------------|
| Employer | Address |
| Telephone | Title |
| Supervisor | Dates Worked |
| | Reason for Leaving |

OFFICE SKILLS (If Applicable) Check the column that best describes your knowledge:

| | Beginner | Intermediate | Advanced |
|-----------------------|----------|--------------|----------|
| Microsoft Word | | | |
| Microsoft Excel | | | |
| Microsoft Access | | | |
| Microsoft Power Point | | | |
| Bookkeeping | | | |
| Transcription Ability | | | |
| Shorthand Ability | | | |

LICENSES & CERTIFICATES

| License/Certificate Type | Licensing Authority | Number | Expiration |
|--------------------------|---------------------|--------|------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

BUSINESS/PROFESSIONAL REFERENCES: *Do not include family members*

| Name & Address | Phone |
|----------------|-------|
| | |
| | |
| | |
| | |

ADDITIONAL INFORMATION: *List below any specialized training or job related skills acquired through military, civic, business, or other activity, **paid or unpaid***

State any additional information which might be helpful to us in considering your application.

EMPLOYMENT OF MINORS

The Town of Hingham is subject to certain child labor provisions regarding the employment of persons under the age of 18. Further, an Employment Permit or Educational Certificate may be required, depending on your age.

Are you under age 18? If yes, please indicate your age: _____

CAREFULLY READ ALL PARTS OF THIS APPLICATION FORM BEFORE SIGNING

- I understand that acceptance of this application by the Town of Hingham does not imply that I will be employed.
- The information that I provided is true and complete. I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.
- I understand that any offer of employment that I receive from the Town of Hingham is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Hingham receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry (CORI check) and/or Credit check if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination.
- In processing my application, the Town of Hingham may verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics.
- I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting: my present and former employers; individuals listed as business, educational or personal references; and other individuals to provide or further clarify information about me.
- I hereby release the Town, my present and former employers and all individuals contacted for factual information about me, from any and all liability for damages arising from furnishing the requested information.
- If employed by the Town of Hingham, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to a physical examination, that I may be subject to drug and/or alcohol testing, that the Town may request a CORI and/or Credit check on me, investigate my driving record or verify my license(s) or certifications as required for employment at any time during my employment. I hereby authorize the Town to conduct a CORI and/or Credit check on me as a condition of applying for a position with the Town, where applicable, and agree to sign a CORI and/or Credit Request Form reflecting my authorization of the CORI and/or Credit check. I further release the Town and its agents from any and all potential claims associated with the Town's performing a CORI and/or Credit check on me in connection with my

application for a position with the Town. As a condition of employment an employee may be required to provide additional or updated information and may require both drug testing and employment physical in order to allow us to have necessary information for making a proper decision or reasonable accommodations, if necessary.

- I understand that the Town of Hingham is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

MY SIGNATURE CERTIFIES THAT I HAVE READ AND AGREED WITH THE ABOVE STATEMENTS AND ALL STATEMENTS CONTAINED IN THIS EMPLOYMENT APPLICATION.

Signature of Applicant: _____ Date : _____

Please Print Name: _____

The Town of Hingham is an equal opportunity employer M/F/D/V and does not discriminate based on race, gender, national origin, age, disability, marital or veteran status, sexual preference or any other legally protected status.

Counselor Availability Form
 What Sessions Are You Available?
 For each session, please check "available" or "not available."

Half Day PreSchool (**weeks 1-11**): 8:45am-11:45am
 Full Day PreSchool (**weeks 1-11**): 8:45am-2:45pm
 Fun Time (**weeks 1-11**): 9:00am-3:00pm
 Adventure Club (**weeks 1-11**): 9:15am-3:15pm
 Teen Extreme (**weeks 1-11**): 9:30am- 3:30pm and 8:30am- 8:30pm on Thursdays
 Sports Experience at Cronin Field (**weeks TBD**): 9:00am-noon
 Harbor Girl Sports (**weeks TBD**): 9:00am-noon
 Parkland (**weeks 3-8**): 9:00am-3:00pm

| | | Available | Not Available |
|--------------|-------------------------|--------------------------|--------------------------|
| Session 1: | June 22- June 26 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 2: | June 29- July 3 * | <input type="checkbox"/> | <input type="checkbox"/> |
| Saturday 7/4 | *4th of July Road Race* | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 3: | July 6- July 10 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 4: | July 13- July 17 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 5: | July 20- July 24 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 6: | July 27- July 31 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 7: | August 3- August 7 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 8: | August 10- August 14 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 9: | August 17- August 21 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 10: | August 24- August 28 | <input type="checkbox"/> | <input type="checkbox"/> |
| Session 11: | August 31- September 4 | <input type="checkbox"/> | <input type="checkbox"/> |

Are you planning on playing a High School **Fall** sport? If so, which sport?

Name: _____

Signature: _____

Date: _____

Please return to info@hinghamrec.com or the Hingham Rec Office

Working the 4th of July Road Race (Saturday, 7/4/2026) is required for all
 counselors