

MUNICIPALITY OF KINGSTON
DEPARTMENT of PARKS & RECREATION
Kingston, PA 18704

655 Third Ave

570-287-1106

(PLEASE PRINT LEGABLY)

Name: _____

Address: _____

Home Phone: _____

Mobile Phone: _____

INDICATE POSITION for which you are applying: _____

EDUCATION: Name and Address

Secondary: _____

College: _____

Graduate School: _____

Other: _____

EXTRA CIRCULAR ACTIVITIES: _____

WORK EXPERIENCE: Start with most recent job and how long you worked at each:

1. _____

2. _____

3. _____

How many days or weeks vacations do you plan on taking (please list dates)? _____

On what date will you or did you turn 16? _____

