



*Winooski Department of Recreation and Community Wellness  
32 Malletts Bay Ave · 655-1392 x 21 · nina.ridhibhinyo@gmail.com*

**APPLICANT INFORMATION:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Birth Date \_\_\_\_\_

Have you been convicted of a felony in the last 5 years?      Yes       No

Please list any medical conditions, physical limitations or other restrictions:

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

**EMERGENCY CONTACT (during program operation hours):**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Please rank the following positions in order of preference:

- \_\_\_ Arts & Culture Counselor (Approximately 30 hrs/wk)
- \_\_\_ Fitness & Personal Wellness Counselor (Approximately 30 hrs/wk)
- \_\_\_ Garden & Environment Counselor (Approximately 30 hrs/wk)
- \_\_\_ Special Programs Counselor (Approximately 30 hrs/wk)

Please explain briefly your interest in this position:

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

This application is filled out to the best of my knowledge.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

*This form along with your résumé is due by May 15, 2009 to the Department of Recreation and Community Wellness offices located in the O'Brien Community Center at 32 Malletts Bay Ave, Winooski, VT 05404.*