



**2019-20 Part-Time Employment Application**

Applications are accepted year round and kept on file for 90 days. After 90 days you are welcome to apply again, as needs are always changing. Applications can be filled out electronically, saved and emailed to the address below; printed, completed and mailed in; or submitted in person at the address below or at any PP&R Community Center. Only completed applications will be considered. Qualified candidates will be contacted as relevant positions become available.

For more information about applying please visit <http://www.portlandoregon.gov/parks/38305> , call us at 503-729-3368 or email us at: [ParksRecreationHiring@portlandoregon.gov](mailto:ParksRecreationHiring@portlandoregon.gov)

Submit applications via mail to: **Portland Parks & Recreation**  
305 NE 102nd Ave, Suite 250  
Portland , OR 97220

Submit applications via email at: [ParksRecreationHiring@portlandoregon.gov](mailto:ParksRecreationHiring@portlandoregon.gov)

<u>Certifications</u>	<u>Expiration Date</u>	Please mark which age group(s) you are comfortable working with:		
<input type="checkbox"/> Standard First Aid	_____	<input type="checkbox"/> Preschool (2-5yrs)	<input type="checkbox"/> Youth (6-12yrs)	
<input type="checkbox"/> C.P.R.	_____	<input type="checkbox"/> Teen (13-17yrs)	<input type="checkbox"/> Adult	<input type="checkbox"/> Senior (60+)
<input type="checkbox"/> Food Handlers	_____			
<input type="checkbox"/> Other Certifications: _____				

All positions require First Aid/CPR \*\*\*

Please indicate which positions or areas you would like to apply for

Customer Service	Enrichment	Performing Arts	Sports	Health & Fitness
<input type="checkbox"/> Customer Service Rep.	<input type="checkbox"/> After School	<input type="checkbox"/> Ballet	<input type="checkbox"/> Basketball	<input type="checkbox"/> Fitness Attendant
<input type="checkbox"/> Facility Attendant	<input type="checkbox"/> Art/Crafts	<input type="checkbox"/> Dance	<input type="checkbox"/> Gymnastics	<input type="checkbox"/> Personal Trainer
<input type="checkbox"/> Inclusion Assistant	<input type="checkbox"/> Cooking	<input type="checkbox"/> Music	<input type="checkbox"/> Skate	Identify certification above
<input type="checkbox"/> Party Host	<input type="checkbox"/> Visual Arts	<input type="checkbox"/> Theater	<input type="checkbox"/> Soccer	
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Sports Official	<input type="checkbox"/> Group Fitness Instructor
			<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

For the areas you have indicated above, please relate specific experiences, including age groups.

I have also attached a resume and/or cover letter

Name: \_\_\_\_\_ Pronouns: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Education- please indicate highest level completed: \_\_\_\_\_  I would like to opt out of email communication regarding hiring

Do you speak, write or read any languages other than English?  Yes \_\_\_\_\_  No

Have you worked for Portland Parks & Recreation previously?  Yes  No

How did you hear about this job?  School (name)  PP&R Website  Other Website (name)  Other: \_\_\_\_\_

Hours vary by program, what hours can you work?  Morning  Mid-day  Afternoon  Evening  Any time of day

How many hours per week can you work? (Mark all that apply)  5-10  10-20  20-30  30-40

Area of Portland you prefer to work:  North  Northeast  Southeast  East  West  Anywhere

List specific sites if applicable: \_\_\_\_\_

What is most important to you? (Please rank in order):  Time of Day  Hours/Week  Location

**Please list your employment and/or volunteer history. Begin with your most recent experience.**

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Position: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Duties: \_\_\_\_\_

Wage: \_\_\_\_\_/Hour      Hours: \_\_\_\_\_/Week      May we contact this employer:  Yes     No

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Position: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Duties: \_\_\_\_\_

Wage: \_\_\_\_\_/Hour      Hours: \_\_\_\_\_/Week      May we contact this employer:  Yes     No

Reason for leaving: \_\_\_\_\_

<b>Veteran's Preference</b>	<p><b>If you are requesting Veteran's Preference</b>, attach a copy of your DD214/DD215 and/or Veteran's Administration letter stating your disability to your profile. You must request Veteran's Preference AND include a copy of your documentation for each recruitment you apply for.</p> <p><b>Veteran's Preference documentation must be submitted with your application.</b></p>
<b>Other Information</b>	<p>I understand that if hired by Portland Parks &amp; Recreation, my employment is part-time, seasonal and at-will. I further understand that I am not guaranteed a certain number of hours. Hours and schedules are determined by program demand, facility need, weather, and mobility and employee experience.</p> <p>I have made no willful misrepresentations, omissions or falsifications. I am aware that should investigation disclose such misrepresentations, falsifications or omissions in the information I have submitted in the application process, my application will be rejected. If, after acceptance for employment, subsequent investigation should disclose misrepresentation, falsification or omission, it will be just cause for immediate dismissal.</p> <p>Signature &amp; Date : _____</p>
<b>References</b>	<p>1. Name _____ Relationship to applicant _____          Phone _____ Email _____</p> <p>2. Name _____ Relationship to applicant _____          Phone _____ Email _____</p>



# PORTLAND PARKS & RECREATION

Healthy Parks, Healthy Portland

## Portland Parks & Recreation Confidential Applicant Information

### Gender, Ethnicity & Race Self-Identification Form

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Portland Parks & Recreation invites applicants to self-identify their gender, ethnicity, and race. This voluntary information is separated from the application at the time of processing and prior to evaluation of the application. Submittal of this information is strictly voluntary and will be kept confidential. When reported, data will not identify any specific individual.

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#### Personal Data

**Gender:** How do you identify? \_\_\_\_\_

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#### Race/Ethnicity

**Which of these group(s) best describes how you identify yourself racially and/or ethnically?**

- |  |   |
|--|---|
| <input type="checkbox"/> African Immigrant                 | <input type="checkbox"/> American Indian/Alaskan Native   |
| <input type="checkbox"/> Asian                             | <input type="checkbox"/> Black or African American        |
| <input type="checkbox"/> Hispanic/Latino                   | <input type="checkbox"/> Native Hawaiian/Pacific Islander |
| <input type="checkbox"/> Slavic/Eastern European Immigrant | <input type="checkbox"/> White                            |
| <input type="checkbox"/> Multi-Racial                      | <input type="checkbox"/> Other: _____                     |