SUMMIT METRO PARKS SEASONAL EMPLOYMENT APPLICATION

YOU MUST COMPLETE ONE APPLICATION FOR EACH DESIRED POSITION

NAME			
ADDRESS	CITY		
ZIP PHONE		EMAIL	
		How did you hear about it?	
,) Yes	so, where/when?	
AVAILABILITY (Dates) Start		Hours	
		3rd	
		alent? O No O Yes Expiration	
REFERENCES:		Address	
		Address	
immediate dismissal. My signature gives any and all claims against Summit Metro action or claims that I may have or brin	Summit Metro Parks permission Parks, its officers, employees argainst Summit Metro Parks sh	this application. Providing false information to conduct a personal background check, and agents as a result. I understand and agre hall be commenced within the applicable staff action, or within six (6) months after my	and I agree to waive e that any causes of atute of limitations
Signature		Date	



SEASONAL EMPLOYMENT OPPORTUNITIES

RETURN TO:

employment@summitmetroparks.org

OR MAIL TO:

Human Resources Summit Metro Parks 975 Treaty Line Rd. Akron, OH 44313

