ELYRIA PARKS & RECREATION DEPARTMENT 131 Court Street Suite, 103 Elyria, OH 44035

February 16, 2024

The Annual Safety Town Program will begin on June 10, 2024. The Elyria Police Department and the Elyria Parks and Recreation Department are looking for volunteers to work with the children registered for Safety Town. Safety Town has become an annual summer educational program for children who will be attending Kindergarten in the fall of 2024. Students eligible to become a volunteer must have completed the 5th grade or higher at the end of the 2024 school year. Safety Town will be held at RAPHA Academy (former Northwood Middle School) located at 700 Gulf Road. Volunteers are required to be present from 8:30 a.m. until noon each day, unless otherwise advised.

Please complete the attached application to be considered for a Safety Town Instructor Position. Please take into consideration any vacations or family outings that may be planned when applying and selecting the dates that you will be available. Instructors must be available for a minimum of **2** of the weeks to be considered. Instructors are required to be present **4 of the 5 days** in the weeks scheduled to count as a full week of work. Please note any individual days that you may not be able to work during a week that you select. It is very important that you make every attempt to attend all 5 days of Safety Town as we will assign jobs for the entire week.

Applications are due by Friday April 20,2024; no late applications will be accepted. Those students who are selected will be notified via mail and will be advised of the work assignment in this letter. Student instructors will be required to attend a Mandatory Instructor's meeting on either Saturday May 18, 2024 starting at 10:00 a.m. or Tuesday May 21, 2024 starting at 6:00 p.m. at East Recreation Center, 1101 Prospect Street. Please be on time we will be doing training at this session. You do not need to attend both sessions.

Keep in mind that neatness and full completion of the application are important requirements for being selected. Students that have previously worked Safety Town will receive first consideration. **First time Instructor Applicants will need to have a letter of reference from a Teacher, Pastor, etc., attached to the application.

Completed applications can be mailed or dropped off at the Elyria Parks & Recreation Department at the following address:

Nicole Edwards, Recreation Supervisor Elyria Parks & Recreation Department 131 Court Street, Suite 103 Elyria, OH 44035

Sincerely

Nicole Edwards

Nicole Edwards

Recreation Supervisor

Elyria Parks & Recreation Department
440-326-1503

ELYRIA PARKS & RECREATION DEPARTMENT & ELYRIA POLICE DEPARTMENT Safety Town Instructor Application

PLEASE PRINT IN BLUE OR	<u>BLACK INK</u> APPL	APPLICATION DATE:		
NAME:	DATE OF E	BIRTH:	AGE:	
ADDRESS:	CITY		_ZIP	
PHONE:	CELL/HOME	Ma	ile or Female	
GRADE COMPLETED (end o	of 2023 year):	T-SHIRT SIZE: YL AS	AM AL AXL (CIRCLE)	
PLEASE CHECK ONE:	NEW INSTRUCTOR	RETURNING	INSTRUCTOR	
Please Check Availab	le Weeks (Minimum of 2 wo	eeks is required to l	pe considered)	
June 10-14 or	_ June 17-21 orJune 2	24 – June 28		
DAYS OF THE SELECTED WI	EEKS THAT I HAVE A CONFLI	СТ:		
REASON I WISH TO BE A SA	AFETY TOWN INSTRUCTOR:	(INCLUDE PREVIOU	S EXPERIENCE)	
IF YOU ARE A RETURNING THIS YEAR IN SAFETY TOW	INSTRUCTOR PLEASE SELECT	Γ ALL AREAS YOU W	OULD LIKE TO HELP	
COLOR GROUP LEA	DER INSTRUCTOR	CHARACTER _	TEACHER	
ALL STATEMENTS IN THIS A	APPLICATION ARE TRUE TO	THE BEST OF MY KN	IOWLEDGE:	
APPLICANT SIGNATURE:		DATE:		
PARENTAL CONSENT AND	SUPPORT OF PARENTS/GUA	ARDIAN:		
PARENT/GUARDIAN SIGNA	ATURE:	DATF:		

EMERGENCY INFORMATION: Does your child have any medical conditions of which we should be aware? Please list any/all allergies especially food				
allergies:				
EMERGENCY CONTACT INFORMATION:				
NAME:	RELATIONSHIP:	PHONE:		
NAME:	RELATIONSHIP:	PHONE:		
NAME:	RELATIONSHIP:	PHONE:		
Participant Permission:				
I hereby give permission for m	y child named above to volunteer for the City	of Elyria Safety Town.		
accidents or injury to my child	I hereby agree to hold harmless, The City of Elwhile participating in any of the Safety Town Sastaff and partner agencies to seek medical tr	Sessions and activities. I also give		
Participant/Parent/Guardian	Signature Date			
Photo Release for mino	rs under 18:			
Department, and all partner as during Safety Town, either cor publications, reports, and page	e staff of the Safety Town, Elyria Police Depart gencies to use, reproduce, publish, and redistr applete or in part, alone or in connection with p es of the website, whether now known or late Recreation Department, and all partner agence	ribute photograph(s) taken of my child press releases, promotional or publicity r invented, of the City of Elyria, Elyria Police		
Initial ONE of the following st	atements:			
I agree to the above and	d grant permission for my child to be photogra	aphed		
I do NOT want my child	to be photographed			

All programs and services offered by the City of Elyria are available without regard to race, color, religion, sex, national origin, age, marital status or veteran status, disability or any other legally protected status