



# Township of Bernards

1 Collyer Lane, Basking Ridge, NJ 07920

908-766-2510 • [www.bernards.org](http://www.bernards.org)

## JOB POSTING

**POSTING DATE:** February 5, 2024

**APPLICATION DEADLINE:** Until position filled

<b>POSITION:</b> Group Counselor		<b>POSITION TYPE:</b> Seasonal
<b>DEPARTMENT:</b> Parks & Recreation		<b>POSITION REPORTS TO:</b> Group Leader and Supervisors
<b>HOURS/WEEK:</b> 30	<b>SCHEDULE:</b> Monday – Friday, 8:15AM – 1:45PM	<b>SALARY:</b> \$13.73/hour

### **PRINCIPAL DUTIES:**

Provides creative and quality activities for children enrolled in the Summer Recreation Program. Acts as positive role model and leader for all children enrolled in the program.

### **JOB REQUIREMENTS:**

Ability to supervise groups of children at the program site and on off-site trips and maintain group control by keeping all children in assigned group together in an activity area. Ability to assist with planning, preparing and implementing activities, games and arts & crafts for children. Must be able to create and maintain enthusiasm among participants. Organize and assist children during snack and lunch breaks as well as take children to the restroom facilities when needed. Must have the ability to enforce program policies and safety procedures. Must possess problem-solving skills in situations that may arise between campers and/or Group Counselors.

### **EDUCATION, EXPERIENCE & SPECIAL REQUIREMENTS:**

#### **Experience:**

- Knowledge of games and activities suitable for children in Kindergarten through 5<sup>th</sup> grade.
- Previous experience working with children recommended, including but not limited to, babysitting younger siblings, relatives, neighbors, friends; volunteer experience working with children; previous summer program experience.

#### **Special Requirements:**

- Must be 15 years old by June 1<sup>st</sup>.
- Must attend Staff Orientation on Saturday, June 1<sup>st</sup>, 2024, 8am - 5pm.
- Must be able to work the entire 6-week program, NO EXCEPTIONS. Monday – Friday, June 24<sup>th</sup> – August 2<sup>nd</sup>, 8:15am – 1:45pm with no program on July 4, 2024.
- Must be available to attend Family Fun Night in the evening on Tuesday, July 9, 2024.

**\*\*\*NOTE: Please read the attached application process and full job description prior to applying for this position. Please use the application attached to this posting.\*\*\***

**CONTACT:** Please submit all applications to:

**Bernards Township Parks & Recreation**

**Att: Russell Surace**

**1 Collyer Lane**

**Basking Ridge, NJ 07920**

**Fax: 908-766-1941**

**[rsurace@bernards.org](mailto:rsurace@bernards.org)**

### **Bernards Township is an Equal Opportunity Employer**

Effective 9/1/11, all employees of State and local government must reside in the State of NJ, unless exempted under law. If you already work for State or local government as of 9/1/11, and you do not live in NJ, you are not required to move to NJ if there is no more than a seven day break in employment. However, if you begin your office, position or employment on 9/1/11 or later, you must reside in NJ. If you do not reside in NJ, you have one year after the date you take your office, position or employment to relocate your residence to NJ.

If you do not do so, you are subject to removal from your office, position or employment.



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## JOB DESCRIPTION

<b>JOB TITLE:</b> Group Counselor		<b>DATE:</b> February 2024
<b>DEPARTMENT:</b> Parks & Recreation		<b>REPORTS TO:</b> Group Leader
<b>JOB STATUS:</b> Seasonal	<b>HOURS/WEEK:</b> 30	<b>SCHEDULE:</b> Monday – Friday, 8:15AM – 1:45PM

**SUMMARY:** *Briefly describe what the position was created to accomplish.*

Provides creative and quality activities for children enrolled in the Summer Recreation Program. Acts as positive role model and leader for all children enrolled in the program.

**WORKING CONDITIONS:** *The environment in which the job is performed, especially any unique conditions outside a normal office environment.*

Outdoors and indoors at program site and off-site trips.

**ESSENTIAL FUNCTIONS:** *The tasks, duties and responsibilities of the position that are most important to get the job done.*

- Follow a daily and weekly schedule of activities.
- Assist with daily attendance.
- Participate in the supervision of children at the program site.
- Take an active role and participate in your assigned group's daily activities.
- Maintain group control by keeping all children in your assigned group together in an activity area.
- Assist Group Leader with the planning, preparation and implementation of activities.
- Organize and implement new games, using resources provided.
- Assist children during arts and crafts sessions.
- Enforce all program policies and procedures.
- Report any participant discipline problems to your Group Leader and/or Assistant Site Supervisor and Site Supervisor and resolve discipline problems according to policy.
- Enforce program safety procedures.
- Report any accidents or un-resolveable matters to the Group Leader, Assistant Site Supervisor and/or Site Supervisor.
- Perform other duties as assigned.

**KNOWLEDGE, SKILLS AND ABILITIES:** *The specific minimum competencies required for job performance.*

- Knowledge of activities and games suitable for Kindergarten through 5th grade.
- Must possess problem-solving skills in situations that may arise between campers and/or Group Counselors.
- Ability to create and maintain enthusiasm among participants.
- Ability to read, write, speak, understand and communicate in English sufficiently to perform the duties of the position.
- Demonstrate interpersonal skills in overseeing young children.
- Ability to establish and maintain effective working relationships with associates and the general public.
- Ability to regularly use hands to handle, feel, or operate objects, tools or controls and to reach with hands and arms. Frequently required to stand, walk, talk, hear, sit, climb, balance, kneel, crouch, crawl.
- Must be able to lift 50 pounds and carry it for 100 feet.

**EDUCATION, EXPERIENCE & SPECIAL REQUIREMENTS:**

**Experience:**

- Knowledge of games and activities suitable for children in Kindergarten through 5<sup>th</sup> grade.
- Previous experience working with children recommended, including but not limited to, babysitting younger siblings, relatives, neighbors, friends; volunteer experience working with children; previous summer program experience.

**Special Requirements:**

- Must be 15 years old by June 1<sup>st</sup>.
- Must attend Staff Orientation on Saturday, June 1<sup>st</sup>, 2024, 8am - 5pm.
- Must be able to work the entire 6-week program, NO EXCEPTIONS. Monday – Friday, June 26<sup>th</sup> – August 4<sup>th</sup>, 8:15am – 1:45pm with no program on July 4, 2024.
- Must be available to attend Family Fun Night in the evening on Tuesday, July 9, 2024.

2024

\*New Candidate\*  
Summer Recreation Program



# APPLICATION FOR EMPLOYMENT

Administration Building: One Collyer Lane, Basking Ridge, NJ 07920 Fax 908-204-3015

Application Date: \_\_\_\_\_

Name: \_\_\_\_\_

Position Applied For: Summer Recreation Program

Circle one: Group Counselor    Group Leader    Assistant Site Supervisor    Site Supervisor

Site Preference: Please rank the following sites from 1 (first choice) to 3 (last choice) in order of preference.

\_\_\_\_\_ Cedar Hill (K-5<sup>th</sup>)    \_\_\_\_\_ ~~Liberty Corner (K-5<sup>th</sup>)~~  
\_\_\_\_\_ Oak Street (K-5<sup>th</sup>)    \_\_\_\_\_ Mount Prospect (K-5<sup>th</sup>) )

Department: Parks and Recreation

## Building Location:

- ☒ Administration Building - One Collyer Lane
- ☐ Police Building - One Collyer Lane
- ☐ Engineering Services Building – 277 South Maple Avenue
- ☐ Health Department - 262 South Finley Avenue
- ☐ Bernards Township Library - 32 South Maple Avenue
- ☐ Bernards Township Sewerage Authority Plant – 726 Martinsville Road

The Township of Bernards considers applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, handicap or disability, sexual orientation, domestic partnership or any other legally protected status.

**A RESUME IS NOT A SUBSTITUTE FOR COMPLETING THIS FORM IN ITS ENTIRETY.**

All information will be verified and all references will be checked. Information will be kept confidential to the extent permitted by law.

**DO NOT WRITE BELOW THIS LINE**

RECOMMEND FOR EMPLOYMENT: ☐ Yes    ☐ No    IF NO, HOLD FOR FUTURE USE? ☐ Yes    ☐ No

IF YES, START DATE: \_\_\_\_\_ START SALARY: \_\_\_\_\_  
HUMAN RESOURCES SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**PLEASE PRINT**

**I. PERSONAL**

LAST NAME		FIRST	MIDDLE	EMAIL ADDRESS
PRESENT ADDRESS (NUMBER, STREET, CITY, STATE , ZIP CODE)				TELEPHONE NUMBER
PERMANENT ADDRESS (IF DIFFERENT THAN PRESENT ADDRESS)				TELEPHONE NUMBER
ARE YOU 18 YEARS OF AGE OR OLDER? (If no, you will be required to show proof of eligibility to work.)				<input type="checkbox"/> Yes <input type="checkbox"/> No
ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES? (Proof of US Citizenship or work authorization status will be required upon employment)				<input type="checkbox"/> Yes <input type="checkbox"/> No
NAME OF RELATIVE OR FRIENDS EMPLOYED BY BERNARDS TOWNSHIP				
HAVE YOU EVER BEEN EMPLOYED BY BERNARDS TOWNSHIP? IF YES, STATE WHEN.				<input type="checkbox"/> Yes <input type="checkbox"/> No

**II. POSITION AND PERSONAL INTERESTS**

POSITION APPLIED FOR	TITLE		SALARY DESIRED \$ _____ PER
ARE YOU EMPLOYED NOW? <input type="checkbox"/> Yes <input type="checkbox"/> No		DATE AVAILABLE TO START WORK	HOW WERE YOU REFERRED TO US?
WHAT KIND OF WORK DO YOU GENERALLY PREFER? (INTERESTS AND CAREER OBJECTIVES)			
COMPLETE IF DRIVING IS AN ESSENTIAL PART OF THE JOB BEING APPLIED FOR DO YOU HAVE A VALID DRIVER'S LICENSE? <input type="checkbox"/> Yes <input type="checkbox"/> No PLEASE SIGN TO INDICATE YOUR AUTHORIZATION FOR THE TOWNSHIP TO PERFORM A RECORD CHECK OF THE DIVISION OF MOTOR VEHICLES' FILES, UPON AN OFFER OF EMPLOYMENT BY THE TOWNSHIP:			

**III. EDUCATION AND TRAINING**

SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	CIRCLE LAST YEAR COMPLETED	DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
HIGH SCHOOL OR EQUIVALENT			9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No	
TECHNICAL OR COMMERCIAL			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER (SPECIFY)			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
ARE YOU TAKING ANY COURSE OF STUDY NOW? IF YES, PROVIDE DETAILS: <input type="checkbox"/> Yes <input type="checkbox"/> No			DATE TO BE COMPLETED		
LIST ANY SCHOLASTIC HONORS, HONORARY SOCIETIES, FELLOWSHIPS AND SCHOLARSHIPS.					
DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, SKILLS OR EXTRA-CURRICULAR ACTIVITIES (i.e. EMT or fire fighting training and participation, etc.) Exclude those that indicate race, religion, sex, age, national origin or other protected classification.					
IF YOU HAVE EMT OR FIRE FIGHTING CERTIFICATION, WOULD YOU BE WILLING TO VOLUNTEER FOR THE TOWNSHIP DURING YOUR WORKDAY?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
WHAT COMPUTER SKILLS DO YOU HAVE AND WHAT OFFICE MACHINES CAN YOU USE? (IF APPLICABLE)					

#### IV. EMPLOYMENT HISTORY

Please account for all periods of employment, including U.S. Armed Forces experience, periods of travel, and self-employment. List present or last employer first. If more space is desired, please use an additional application.

NAME OF EMPLOYER		ADDRESS OF EMPLOYER		DATE EMPLOYED FROM / MONTH YEAR		TO / MONTH YEAR	
TELEPHONE OF EMPLOYER		SUPERVISOR'S NAME & TITLE		DEPARTMENT			
YOUR POSITION OR TITLE:				REASON FOR LEAVING:			
MAY WE CONTACT EMPLOYER?		NOW [ ]		AT A LATER DATE [ ]		NOT AT ALL [ ]	

NAME OF EMPLOYER		ADDRESS OF EMPLOYER		DATE EMPLOYED FROM / MONTH YEAR		TO / MONTH YEAR	
TELEPHONE OF EMPLOYER		SUPERVISOR'S NAME & TITLE		DEPARTMENT			
YOUR POSITION OR TITLE:				REASON FOR LEAVING:			
MAY WE CONTACT EMPLOYER?		NOW [ ]		AT A LATER DATE [ ]		NOT AT ALL [ ]	

NAME OF EMPLOYER		ADDRESS OF EMPLOYER		DATE EMPLOYED FROM / MONTH YEAR		TO / MONTH YEAR	
TELEPHONE OF EMPLOYER		SUPERVISOR'S NAME & TITLE		DEPARTMENT			
YOUR POSITION OR TITLE:				REASON FOR LEAVING:			
MAY WE CONTACT EMPLOYER?		NOW [ ]		AT A LATER DATE [ ]		NOT AT ALL [ ]	

NAME OF EMPLOYER		ADDRESS OF EMPLOYER		DATE EMPLOYED FROM / MONTH YEAR		TO / MONTH YEAR	
TELEPHONE OF EMPLOYER		SUPERVISOR'S NAME & TITLE		DEPARTMENT			
YOUR POSITION OR TITLE:				REASON FOR LEAVING:			
MAY WE CONTACT EMPLOYER?		NOW [ ]		AT A LATER DATE [ ]		NOT AT ALL [ ]	

NAME OF EMPLOYER		ADDRESS OF EMPLOYER		DATE EMPLOYED FROM / MONTH YEAR		TO / MONTH YEAR	
TELEPHONE OF EMPLOYER		SUPERVISOR'S NAME & TITLE		DEPARTMENT			
YOUR POSITION OR TITLE:				REASON FOR LEAVING:			
MAY WE CONTACT EMPLOYER?		NOW [ ]		AT A LATER DATE [ ]		NOT AT ALL [ ]	

## V. OUTSIDE ORGANIZATIONS

ARE YOU AFFILIATED WITH ANY OTHER COMPANY THAT REQUIRES WORK OF YOU? <input type="checkbox"/> Yes <input type="checkbox"/> No      IF YES, PLEASE EXPLAIN
ARE YOU ENGAGED IN ANY PERSONAL BUSINESS OR ENTERPRISE? <input type="checkbox"/> Yes <input type="checkbox"/> No      IF YES, PLEASE EXPLAIN
IN WHAT BUSINESS, PROFESSIONAL OR SCIENTIFIC ASSOCIATIONS DO YOU HOLD MEMBERSHIP? Exclude those that indicate race, religion, sex, age, national origin or other protected classification.
WHAT PROFESSIONAL LICENSES DO YOU HOLD?
DESCRIBE ANY OTHER EXPERIENCE THAT MIGHT BE HELPFUL IN CONSIDERING YOUR APPLICATION. (Other work experience, internships, school activity, apprenticeships, etc.)

## VI. REFERENCES

Exclude relatives but provide three (3) persons not previously mentioned who are most familiar with your work, ability and training.

NAME	RELATIONSHIP	POSITION	ADDRESS	TELEPHONE

## VII. ESSENTIAL FUNCTIONS

**Do not answer this question without first reviewing the Job Description**

ARE YOU ABLE TO PERFORM THE ESSENTIAL REQUIREMENTS OF THE JOB, WITH OR WITHOUT REASONABLE ACCOMODATION?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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## VIII. RELEASE OF APPLICATION

IF YOU ARE UNSUCCESSFUL IN YOUR CANDIDACY FOR A POSITION WITH THE TOWNSHIP, DO YOU WISH YOUR APPLICATION TO BE DISCLOSED?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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## IX. APPLICANTS STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I release former employers and others from any liability that might arise from the disclosure of information.

I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

I understand that misrepresentation or omission of facts called for is basis for township refusal to process application further or, in the event of employment, cause for dismissal. I fully and completely understand that as a condition of employment, I must be able to perform all the duties of the position applied for. I also understand that if employed, by the township, I must abide by all rules and regulations of the employer.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_