

**CITY OF NORMAN  
SUPPLEMENTAL QUESTIONNAIRE  
RECREATION LEADER I**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

This questionnaire is a supplement to your application and will be used for further evaluation of your education, training, and experience as it relates to the RECREATION LEADER I position for which you applied. **FILL OUT THE QUESTIONNAIRE COMPLETELY EVEN IF THIS INFORMATION IS ON YOUR APPLICATION/RESUME!**

1. Do you have experience working with youths in a recreational atmosphere? \_\_\_Yes \_\_\_No If yes, please explain and be specific.

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

2. Are you at least 16 years of age? \_\_\_Yes \_\_\_No

3. Do you have knowledge of the concepts, programming, and administration of recreation activities and programs? \_\_\_Yes \_\_\_No If yes, please explain.

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

4. Do you have experience as a Recreation Leader I or equivalent position? \_\_\_Yes \_\_\_No  
If yes, please list the number of years of experience. \_\_\_\_\_  
Where and when did you obtain this experience? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
What were your duties and responsibilities? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Will you be able to work the hours specified on the job announcement? \_\_\_Yes \_\_\_No

6. Why do you feel you would be the best-qualified applicant for this position?

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

7. List any other information, including personal strengths, that you feel will aid us in determining your qualifications for this position.

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

**EQUAL OPPORTUNITY EMPLOYER**