

Jefferson County Caretaker Application

Name of Caretaker(s) _____

Other family members/individuals who will be residing with Caretaker(s) on a full time basis.

Current Address: _____

City/ State/ Zip: _____

Day Phone: _____ Evening Phone: _____

1. Please list present or previous employer. May we contact these employers?
Yes_____ No_____

Current Employer Name/ Address/ Phone:

Name: _____

Address: _____

Phone: _____

2. List two references (not employers or relatives):

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

3. General Information

A. Please list previous park caretaker experience:

B. Other related experience:

C. Why do you want to be the H.J. Carroll Park Caretaker?

4. Describe the caretaker mobile unit you will be using as residence. Please include dimensions, square footage, utility adapters etc.

5. How many vehicles do you own and will be parked at the caretaker residence site?

6. Do you have any outdoor sheds/storage units or any other outdoor building need? Please list and describe.

7. Additional comments:

Print name

Signature

Date

Print name

Signature

Date