



Forrestville Valley School District #221

P.O. Box 665

601 E. Main Street,

Forreston, IL 61030

Phone: (815) 938 – 2036 Fax: (815) 938 – 9028

SUMMER CREW APPLICATION FORM

Name: _____ Date: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____ E-Mail Address: _____

Duration of Seasonal Employment: Monday through Thursday, June 9th, 2025 – July 31, 2025

*Dependent on school calendar

Summer Crew Workers will need to commit to a firm schedule each day. Please indicate your availability:



7:00 a.m. – 11:00 a.m.



11:30 a.m. – 3:30 p.m.



7:00 a.m. – 3:30 p.m.

Dates NOT Available to Work: _____

Skills or Qualifications: _____

Most Recent Employer or Volunteer Information:

Employer or Organization: _____

Address: _____

Supervisor: _____ Phone Number: _____

References

Name:

Phone Number:

1) _____

2) _____

3) _____

Signature

Date

Please submit completed application to the Forrestville Valley District Office by March 21st.