

## **CAMP STAFF APPLICATION**

This Council is an equal opportunity employer. All applicants for employment will be considered without regard to race, religion, color, sex, age, national origin or ancestry, citizenship, disability, marital status, veteran status, or any other category protected by applicable federal, state, or local laws.

APPLICANT INFORMATION						
Last name	First name		M.I.	Date		
Current street address			Apartment/Unit #			
City State				Zip		
Permanent street address				Apartment/Unit #		
City		State		Zip		
Phone	one Email					
Date available		Expected salary				
POSITION DESIRED (Please mark 1 <sup>st</sup> , 2 <sup>nd</sup> , and 3 <sup>rd</sup> choices)						
Camp Birch Trails						
☐ Assistant camp director       ☐ Assistant cook         ☐ Camp assistant       ☐ Counselor         ☐ Head cook       ☐ Teen leadership di         ☐ Program director       ☐ Trip leader	rector	Art director Boating director  Assistant counselor Health & safety director  Waterfront director Nature director  Trip director Adventure & athletic director				
Camp Winnecomac						
Assistant camp director Program director Art director Counselor Health & safety director Nature director Adventure & athletic director						
Are you a citizen of the United States?  Yes No	I	If not, are you authorized to work in the U.S.?  ☐ Yes ☐ No				
Have you ever worked for this organization?  Yes No	1	If so, when?				
EDUCATION						
Schools attended (high school, college, graduate school):	1	Degree or credits:				
Major study and related courses:						
Year in school or present occupation:						

PREVIOUS CAMP STAFF EXPERIENCE									
Camp name and address Position			Year	ear Sponsoring organizations		Supervisor			
				<u> </u>					
Check all age groups with v		ed: ∐ 6-	8 years [	9-11 years	s 12	2-14 years	15-17 years		
PREVIOUS EMPLOYMI	ENT								
Company				Phone	Phone				
Address			Supervis	Supervisor					
Job title				May we contact your previous supervisor for a reference?  ☐ Yes ☐ No					
Responsibilities									
From	From To Reason for lea			eaving	ving				
Company				Phone	Phone				
Address			Supervis	sor					
Job title				May we contact your previous supervisor for a reference?  ☐ Yes ☐ No					
Responsibilities				<u> </u>					
From	То		Reason for le	eaving					
REFERENCES									
Please list three people not related to you who can judge your qualifications for this position. If you have had previous experience as a camp staff member, one reference should be from a camp director or camp administrator.									
Full name	Relationship				Phone				
Job title	le Address								
Full name	Relationship				Phone				
Job title Address									
Full name	ne Relationship				Phone				
Job title Address									
Why are you interested in working in a camp position?  How will you grow from a position at camp?									

Please describe a time you planned and led an activity for a group of children.					
What outdoor camping experience d	lo you have? How will this qualify you for a position at summe	r camp?			
B		V4			
Please check your camp staff T-shirt	t size: Small Medium Large	XL XXL XXXL			
TRAINING AND SKILLS					
Please list name of course and date	e of most recent certification.				
Lifeguarding	Course	Certification date			
Water safety instructor	Course	Certification date			
Boating instructor	Course	<u> </u>			
First aid	Course	Certification date			
CPR	Course				
Registered nurse	Course				
Emergency medical technician	Course	Certification date			
Challenge course	Course	Certification date			
As camp staff, you will be giving up which may be limiting and not neces	a great deal of privacy and comfort, working long and demand ssarily reflect your way of living (curfews, time on/off, lack of pi	ding hours, adhering to camp policies			
etc.). Applicants must be able to lift up to 50 lbs., bend, sit, and stand for long hours. Do you know of any reason why you would not be					
able to perform the essential functions of the job position for which you are applying with or without reasonable accommodation?					
☐ Yes ☐ No					
Maria what accommodations wight had accommo					
If yes, what accommodations might be necessary?					
	_				
DISCLAIMER AND SIGNATURE					
<ol> <li>I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</li> </ol>					
2. If employed, I agree to conform to the rules and policies of GSNWGL and that at any time I will be free to resign for any reason and that GSNWGL also holds the same right to terminate my employment at will.					
	Service Servic	Date			
Signature		Date			