



# CAMP LOVEWELL

## CAMP STAFF APPLICATION



Date of Application \_\_\_\_\_

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Permanent Address \_\_\_\_\_  
Street & Number City State Zip

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_  
Area & Number Area & Number

School Address \_\_\_\_\_  
Street & Number City State Zip

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_  
Area & Number Area & Number

Dates available From \_\_\_\_\_ To \_\_\_\_\_ Camp Lovewell cannot guarantee days off during camp sessions.

What type of position do you want at camp? \_\_\_\_\_ Salary desired? \_\_\_\_\_

Are you at least 16 years of age?  yes  no Are you 18 years of age or older?  yes  no

Can you perform the essential functions of the job for which you have applied, with or without reasonable accommodation?  yes  no

**Past Work History:** Provide a full record of all employment – paid and volunteer – and explain any gaps in employment. Include any positions on camp staff. Use a separate sheet, if necessary.

Dates	Employer/Supervisor	Address & Phone	Nature of Work	Reason for Leaving

Indicate any employer you do not wish us to contact, and the reason \_\_\_\_\_

**References:** Provide names and addresses of three persons [not relatives] having knowledge of your character, experience, work habits, and ability.

Name	Address & City	Phone



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### Camp Experience

Dates	Camp & Director	Location	Camper or Staff?

### Education High School and Beyond

Years	School	Major Subjects	Degree Granted

Write a brief biographical sketch, including specialized training in camping, and experience or training in other fields which might have a bearing on the position(s) for which you are applying. Attach a separate sheet if necessary.

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What contribution do you think you can make at camp? \_\_\_\_\_

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What contributions do you think a well-run camp can make to children? \_\_\_\_\_

**Harassment:** The camp's policy is to prohibit all forms of harassment by our employees. This includes sexual, racial, religious, and other forms of harassment. Have you ever been accused of harassment of any person including, but not limited to, workplace harassment? (Note: Prior accusation is not an automatic bar to employment. The type of accusation and when it occurred will be evaluated by the camp before a decision is made.)

Yes  No  Explain \_\_\_\_\_

**Criminal Record:** Have you ever been convicted of a crime, other than a minor traffic offense? If yes, please describe. (Note: a prior conviction is not an automatic bar to employment. The type of conviction and when it occurred will be evaluated y the camp before any decision is made.)

Yes  No  Explain \_\_\_\_\_

**Camp Program Skills** In the following list, put a "T" *before* those activities you can organize and teach as an expert, and an "A" for those activities in which you can assist. Put a "C" *after* those in which you have current certification and attach a copy of your certification.

Arts/Crafts	Adventure/Challenge	Nature/Gardening/Farming	Sports/Fitness
<input type="checkbox"/> ceramics/pottery	<input type="checkbox"/> team challenges	<input type="checkbox"/> animals/animal care	<input type="checkbox"/> aerobics/exercise
<input type="checkbox"/> drawing/painting	<input type="checkbox"/> ropes Course	<input type="checkbox"/> environmental studies	<input type="checkbox"/> archery
<input type="checkbox"/> leather craft	<input type="checkbox"/> other _____	<input type="checkbox"/> flowers	<input type="checkbox"/> baseball
<input type="checkbox"/> woodworking	<b>Health/Safety</b>	<input type="checkbox"/> forestry	<input type="checkbox"/> basketball
<input type="checkbox"/> photography	<input type="checkbox"/> CPR	<input type="checkbox"/> insects	<input type="checkbox"/> cheer
<b>Campcraft/Pioneering</b>	<input type="checkbox"/> EMT	<input type="checkbox"/> rocks/minerals	<input type="checkbox"/> fencing
<input type="checkbox"/> hiking	<input type="checkbox"/> first aid	<input type="checkbox"/> vegetables	<input type="checkbox"/> football
<input type="checkbox"/> orienteering	<input type="checkbox"/> first responder	<b>Water Activities</b>	<input type="checkbox"/> gymnastics
<input type="checkbox"/> outdoor cooking	<input type="checkbox"/> lifeguard	<input type="checkbox"/> canoeing	<input type="checkbox"/> horseback riding (English)
<input type="checkbox"/> outdoor living skills	<input type="checkbox"/> nursing	<input type="checkbox"/> kayaking	<input type="checkbox"/> horseback riding (Western)
<input type="checkbox"/> other _____	<b>Drama</b>	<input type="checkbox"/> fishing	<input type="checkbox"/> informal games
<b>Dance (list)</b>	<input type="checkbox"/> clowning	<input type="checkbox"/> swimming	<input type="checkbox"/> lacrosse
<input type="checkbox"/> ballet	<input type="checkbox"/> theater acting	<input type="checkbox"/> other _____	<input type="checkbox"/> martial arts
<input type="checkbox"/> jazz	<input type="checkbox"/> improvisation		<input type="checkbox"/> soccer
<input type="checkbox"/> modern	<b>Music</b>		<input type="checkbox"/> softball
<input type="checkbox"/> tap	<input type="checkbox"/> singing		<input type="checkbox"/> volley ball
<input type="checkbox"/> other _____	<input type="checkbox"/> instrument _____		<input type="checkbox"/> other _____

I authorize investigation of all statements herein, including any checks of criminal records, and release the camp and all others from liability in connection with same. I understand that, if employed, I will be an at-will employee unless there is an agreement or law which alters that status. Furthermore, I understand that any agreement must be in writing and signed by the designated camp official. I understand that misrepresentations or falsifications herein or in other documents completed or submitted by the applicant will result in dismissal, regardless of the date of discovery by the camp.

Signature \_\_\_\_\_ Date \_\_\_\_\_