

CAMP ALLEN

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SUMMER STAFF APPLICATION

PLEASE PRINT Date _____

Name _____

Phone # _____ - _____ - _____ Cell Phone # _____ - _____ - _____

E-mail _____

Address _____

City _____ St _____ Zip _____

Birthday _____ - _____ - _____ Age _____ Sex ___ Male ___ Female

School Attended _____ Date _____

School Attended _____ Date _____

School Attended _____ Date _____

Church Attending _____ City _____

Pastor's Name _____ Phone _____

Area of Interest: (Circle All Areas Of Interest)

***Hospitality * Food Service * Lifeguard *Camp Store**

References

Name _____ Phone # _____

Address _____

City _____ State _____ Zip _____

Name _____ Phone # _____

Address _____

City _____ State _____ Zip _____

Name _____ Phone # _____

Address _____

City _____ State _____ Zip _____

Work Experience

1 Firm _____

Address _____

Type of work _____

Your Position or Title _____

Firm's telephone _____ - _____

Supervisor _____

Employed from _____ to _____

If you left your job, list the reason for leaving _____

2. Firm _____

Address _____

Type of work _____

Your Position or Title _____

Firm's telephone _____ - _____

Supervisor _____

Employed from _____ to _____

If you left your job, list the reason for leaving _____

3. Firm _____

Address _____

Type of work _____

Your Position or Title _____

Firm's telephone _____ - _____

Supervisor _____

Employed from _____ to _____

If you left your job, list the reason for leaving _____

Personal

List any current certifications and licenses (lifeguard, first aid, CPR outdoor skills and / or other professional licenses). Please give expiration date.

Are you a Christian? _____ When did you become a Christian? _____ Describe.

How do you feel about Christianity, and what role does it play in your life? _____

Describe yourself in one word. _____

Please list your strong points. _____

Please list your weak points. _____

CAMP ALLEN INFORMATION RELEASE FORM

Have you at any time ever:

Been arrested for any reason? Yes No

Been convicted of, or pleaded no contest to, any crime? Yes No

Engaged in, or been accused of, any child molestation, exploitation, or abuse? Yes No

Are you aware of:

Having any traits or tendencies that could pose any threat to children, youth, or others? Yes No

Any reason why you should not work with children, youth, or others? Yes No

If the answer to any of these questions is "yes," please explain in detail:

(Please attach additional pages if more space is needed)

Applicant Verification and Release

I recognize that Camp Allen is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

I authorize Camp Allen to contact any person or entity listed in this application, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualification.

I voluntarily release the organization and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize Camp Allen to conduct a criminal background investigation if such a check is deemed necessary.

I agree to abide by all policies and guidelines of Camp Allen, and to protect the health and safety of the children/youth at all times.

Comments: _____

Name (print) _____

Signature: _____

Date: _____

*Be watching for follow up/further communications. Thanks!