



NEW EMPLOYEE APPLICATION
Winter Camp

_____ Date of Application

Name _____ Social Security Number _____

Permanent Address _____ Phone _____
Street & Number City State Zip

E-mail Address _____ Cell Phone _____

School or Business Address _____
Street & Number City State Zip

What type of position do you want at camp? _____ Dates Available _____

Are there any reasons you may have difficulty performing any of the essential elements of the job for which you have applied?

___ Yes ___ No If so please explain _____

If you are hired would you desire or need housing for any person(s) other than yourself at camp?

Education:

Years	School	Major subjects	Degree Granted
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Past Employment:

Dates	Employer	Address/Phone	Nature of Work	Supervisor	Reason for leaving
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Please indicate any employer you do not wish for us to contact and the reason _____

Camp Experience:

Dates	Camp	Director	Address	Camper or Staff
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References (Please give the names/addresses of 3 persons [not relatives] having knowledge of your character, experience and ability)

Name	Address & city	Phone

Please Do Not Leave Blank

In the following list, Please put numeral “1” for those activities you can organize and teach; “2” for those activities in which you can assist in teaching; “3” for a hobby; and, “4” for an interest in learning about and participating with.

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|--|---|--|--|
| <p>Adventure/Challenge</p> <p><input type="checkbox"/> Initiative</p> <p><input type="checkbox"/> Climbing</p> <p><input type="checkbox"/> Hiking</p> <p><input type="checkbox"/> Min. Impact Camping</p> <p><input type="checkbox"/> Overnight</p> <p><input type="checkbox"/> Outdoor skills</p> <p><input type="checkbox"/> Orienteering</p> | <p><input type="checkbox"/> Nature Craft</p> <p><input type="checkbox"/> Painting</p> <p><input type="checkbox"/> Photography</p> <p><input type="checkbox"/> Sketching</p> <p><input type="checkbox"/> Papermaking</p> <p><input type="checkbox"/> Woodworking/Woodshop</p> <p><input type="checkbox"/> Felting</p> <p><input type="checkbox"/> Fabric/Wool dying</p> <p>_____</p> | <p>Music</p> <p><input type="checkbox"/> Lead Singing</p> <p><input type="checkbox"/> Guitar Accompaniment</p> <p><input type="checkbox"/> Instruments</p> <p><input type="checkbox"/> Guitar</p> <p><input type="checkbox"/> Piano</p> <p><input type="checkbox"/> Recorder</p> <p>_____</p> | <p><input type="checkbox"/> Weather</p> <p><input type="checkbox"/> Farm Animals</p> <p>_____</p> |
| <p>Sports</p> <p><input type="checkbox"/> Cooperative Games</p> <p><input type="checkbox"/> Ping Pong</p> <p><input type="checkbox"/> Skiing</p> <p><input type="checkbox"/> Snowshoe</p> <p><input type="checkbox"/> Skating/Hockey</p> | <p>Dance</p> <p><input type="checkbox"/> Square Dancing</p> <p><input type="checkbox"/> Folk Dancing</p> <p>_____</p> | <p>Nature</p> <p><input type="checkbox"/> Animals</p> <p><input type="checkbox"/> Astronomy</p> <p><input type="checkbox"/> Birds</p> <p><input type="checkbox"/> Tracking</p> <p><input type="checkbox"/> Trees and shrubs</p> <p><input type="checkbox"/> Fresh Water</p> <p><input type="checkbox"/> Ecology</p> <p><input type="checkbox"/> Geology</p> | <p>Miscellaneous</p> <p><input type="checkbox"/> Standard First Aid Cert.</p> <p><input type="checkbox"/> Advanced First Aid Cert.</p> <p><input type="checkbox"/> Wilderness First Aid</p> <p><input type="checkbox"/> Wilderness First Responder</p> <p><input type="checkbox"/> CPR Cert.</p> <p><input type="checkbox"/> Campfire Programs</p> <p><input type="checkbox"/> Evening programs</p> <p><input type="checkbox"/> Storytelling</p> <p><input type="checkbox"/> Carpentry</p> <p><input type="checkbox"/> Cooking</p> <p>_____</p> |
| <p>Arts And Crafts</p> <p><input type="checkbox"/> Spinning and weaving</p> <p><input type="checkbox"/> Ceramics</p> <p><input type="checkbox"/> Jewelry</p> | <p>Drama</p> <p><input type="checkbox"/> Skits</p> <p><input type="checkbox"/> Play Directing</p> <p><input type="checkbox"/> Characters</p> | | |

Answer the following *only* if you are applying for a position requiring driving (must be 21 or over):

Do you Drive? Yes No Valid Driver’s License? Yes No State _____

Do you have a Commercial Driver’s license? Yes No

Please describe all of the leadership, teaching, and/or volunteer positions you have held. What qualities do you feel you can bring to camp Glen Brook? _____

Describe your experiences working with children. What do you feel is the most valuable gift as a counselor you can offer to your campers? _____
