

2. Other experience working with youth? _____ YES _____ NO
 If yes, when _____ and where _____

Describe: _____

CAMP POSITION APPLIED FOR

3. Check position applied for: (minimum age is 18)

- _____ Camp Director
- _____ Health Director
- _____ Arts & Crafts Program Director
- _____ Recreation Program Director
- _____ Nature Program Director
- _____ Volunteer Counselor (must be 15 or older)

EDUCATION

School	High School or GED	College or University	Business/Trade School or Other	Apprenticeships or Other Training
Name and Location				
Dates Attended	From To	From To	From To	From To
Years Completed		1 2 3 4 Major:	Course:	Course:
Graduated	Yes No	Yes No	Yes No	Yes No

List additional and/or relevant training completed and/or skills acquired and any certifications you may have obtained:

EMPLOYMENT RECORD

Begin with last or current employer, then next to last, etc. For additional employers, additional information, and explanation for gaps in employment, use an additional sheet.

Name of Employer	Phone	Dates of Employment Mo/Yr. From _____ To _____	
Address	Salary	Hours/Week	Supervisor
Description/Duties	Job Title		
	Reason for Leaving		
Name of Employer	Phone	Dates of Employment Mo/Yr. From _____ To _____	
Address	Salary	Hours/Week	Supervisor
Description/Duties	Job Title		
	Reason for Leaving		
Name of Employer	Phone	Dates of Employment Mo/Yr. From _____ To _____	
Address	Salary	Hours/Week	Supervisor
Description/Duties	Job Title		
	Reason for Leaving		

Are there any employers listed that you do not want us to contact? _____ Yes _____ No

If yes, please list: _____

Have you ever been suspended or discharged from any position? _____ Yes _____ No

If yes, explain: _____

Is there anything not already mentioned which you feel should be brought to our attention and which you feel would help qualify you for this position? (e.g. training, interests, etc.)

Hobbies or special interests:

REFERENCES

List persons who are familiar with your qualifications and background. (No relatives.)

Name/Title	Address	Phone number and e-mail address (if applicable)

Have you ever been convicted of any crime, including any sex related or child abuse related offense?
_____ Yes _____ No

Have you used or been known by any other names? _____ Yes _____ No

If yes, what names have you used? _____

Review this application carefully before signing below.

CERTIFICATE OF APPLICANT: I hereby certify that all statements made on or in connection with this application are true, complete, and correct to the best of my knowledge and belief and I understand and agree that any misstatements or omissions of material fact herein subjects me to disqualification or dismissal. I further understand that my employment depends upon successfully performing assigned work.

I understand that my application will be processed in a confidential manner. I authorize a release of any records pertaining to my education, employment, police and/or personal references to Camp TaPaWingo, if I am a finalist for a staff position.

Signature of Applicant: _____ Date: _____

Thank you for your interest in employment with Camp TaPaWingo

RETURN TO: Ruth Aebischer
 Manitowoc County UW-Extension
 4319 Expo Drive, P.O. Box 1150
 Manitowoc, WI 54221-1150

DEADLINE: June 6, 2008