

Position Desired: _____ (Attach Photo Here)

EMPLOYMENT APPLICATION



TOWERING PINES (boys)

or

(girls) **WOODLAND**



Eagle River, Wisconsin

Voice: 847-446-7311
800-882-7034
FAX: 847-446-7710

Winter Address
242 Bristol Street
Northfield, IL 60093

Internet: towmpines@aol.com
jstarcamp@aol.com
www.campwoodland.com
www.toweringpinescamp.com

Full Name: _____ I like to be called: _____

Home Address: _____ City: _____ St.: _____ Zip: _____

School Address: _____ City: _____ St.: _____ Zip: _____

Phone/Home: _____ School: _____ Best time to call: _____

E-Mail: _____ Drivers Lic.#: _____ State: _____

Present Occupation: _____ Soc. Sec.#: _____

Birthdate: _____ / _____ / _____ Sex: _____ Height: _____ Weight: _____ Marital Status: _____
month / day / year

Dates you are available for employment: (from) June _____ (through) August _____

EDUCATION: School Major/Minor Years Degree

EXPERIENCE: List and give dates of work, camp, travel, military or other life experiences.

Dates Employer Position/Description City/State

Describe any camp experiences or leadership training you may have had: _____

CAMPUS LIFE: Tell us about yourself - include interests, clubs, organizations etc. _____

REFERENCES: Give the enclosed reference forms to at least 3 former employers, teachers, coaches, group leaders, etc. and list them below. *Please return your application form as soon as possible. Your reference cards may be returned seperately.* THIS IS IMPORTANT!

Name _____ Position _____ Tel. _____

Address _____

Name _____ Position _____ Tel. _____

Address _____

Name _____

Position _____

Tel. _____

Address _____

rev.'97

GROUP LIVING: Circle your age group preference: **7-9** **10-12** **13-14** **15-16**

ACTIVITIES: Rate yourself as realistically as possible by:

placing a **1** by those activities you can organize, teach and coach.

placing a **2** by those activities you have a strong background & can actively assist.

- | | | |
|--|---|---|
| <input type="checkbox"/> Archery* | <input type="checkbox"/> Indian Lore | <input type="checkbox"/> Tennis* |
| <input type="checkbox"/> Arts & Crafts* | <input type="checkbox"/> Lake Superior Cruising | <input type="checkbox"/> Trap Shooting |
| <input type="checkbox"/> Camping overnight | <input type="checkbox"/> Landsports* | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Canoeing* | <input type="checkbox"/> Baseball/Softball | <input type="checkbox"/> Computer |
| <input type="checkbox"/> Dance* | <input type="checkbox"/> Basketball | <input type="checkbox"/> Math & Reading |
| <input type="checkbox"/> Diving | <input type="checkbox"/> Soccer | <input type="checkbox"/> English |
| <input type="checkbox"/> Drama* | <input type="checkbox"/> Volleyball | <input type="checkbox"/> Languages (specify) |
| <input type="checkbox"/> Ecology/Zoo* | <input type="checkbox"/> Photography/Video | _____ |
| <input type="checkbox"/> Fishing | <input type="checkbox"/> Piano | <input type="checkbox"/> Water-skiing* |
| <input type="checkbox"/> Guitar/Song Leading | <input type="checkbox"/> Riflery* | <input type="checkbox"/> Windsurfing* |
| <input type="checkbox"/> Gymnastics* | <input type="checkbox"/> Rowing (shell) | <input type="checkbox"/> Personal Hobbies you |
| <input type="checkbox"/> Horseback Riding* | <input type="checkbox"/> Sailing* | would like to instruct: |
| <input type="checkbox"/> English | <input type="checkbox"/> Skin-diving | _____ |
| <input type="checkbox"/> Western | <input type="checkbox"/> Swimming* | _____ |

* indicates featured instructional programs

CERTIFICATIONS: Indicate the expiration date of any certifications that apply to you.

- | | | |
|--|--|---|
| <input type="checkbox"/> Lifeguard Training | <input type="checkbox"/> Adult CPR | <input type="checkbox"/> NRA Instructor |
| <input type="checkbox"/> Lifeguard Instructor | <input type="checkbox"/> Community CPR | <input type="checkbox"/> other: _____ |
| <input type="checkbox"/> Water Safety Instructor | <input type="checkbox"/> First Aid | _____ |

OTHER POSITIONS:

- | | |
|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Cook | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Kitchen | <input type="checkbox"/> Nurse |

HEALTH: Are you now or have you been under medical care within the past two years? _____

If so, for what? _____ Do you smoke? _____

Describe current medication, drugs, etc. _____

Do you have any physical limitations? _____ Explain: _____

GENERAL INFORMATION: How did you learn about this position? _____

What do you see as the most important consideration in working with children? _____

What are your personal expectations for the camp summer? _____

WHAT'S IN IT FORYOU? A summer camp job offers opportunities for teaching experience, studying group relationships, practicing leadership skills & team building, not to mention having a great summer working in the out of doors! In submitting this application you indicate that you have a strong desire to be a positive role model and influence upon

children. We look forward to getting to know you better through the interview process - thank you for your interest in our camps!

Please return the application, photo and any additional information regarding your qualifications and/or limitations for this position to the winter address on the front of this form.

I affirm that the above information is correct and authorize the camp to pursue any background information necessary to verify my suitability for employment.

Signature of applicant: _____ **Date:** _____