

WILLOW GROVE SUMMER DAY CAMP, INC.

3400 Davisville Road * P.O. Box 398 * Willow Grove, PA 19090-0398

Junior Staff _____

Senior Staff _____

STAFF APPLICATION

(PRINT OR TYPE)

Position Applying _____

Salary Requirement _____

_____	_____	_____	<u>M</u> <u>F</u>	_____ - _____ - _____
Last Name	First Name	Middle Initial	Please circle	Social Security Number

_____	_____
Permanent Address	Email

_____	_____	_____	_____
City	State	Zip Code	Telephone – Cell

_____	_____
Present Employment (if employed)	Telephone – Day/Evening

_____	_____	_____	_____
City	State	Zip Code	Date of Birth

_____	_____	_____
Sex & Age of Children (Optional)	Marital Status (Optional)	E-Mail Address

EDUCATION AND TRAINING

_____	_____	_____
High School	Address	Present Yr./Yr. Graduated

_____	_____	_____	_____	_____
College	Major	Degree	Present Yr./Yr. Graduated	

_____	_____	_____	_____
Post Grad. School	Major	Degree	Present Yr./Yr. Graduated

CAMPING EXPERIENCE

LIST CAMPER EXPERIENCE

<u>Camp</u>	<u>Date</u>	<u>Comments</u>
1. _____		
2. _____		

LIST CAMP STAFF EXPERIENCE

<u>Camp</u>	<u>Position</u>	<u>Date</u>	<u>Salary</u>
1. _____			
2. _____			

PAST EMPLOYMENT

<u>Employer</u>	<u>Address/Phone</u>	<u>Dates</u>	<u>Position</u>	<u>Supervisor</u>	<u>Reason for leaving</u>
1. _____					
2. _____					

REFERENCES – PLEASE GIVE THREE

<u>Name</u>	<u>Address</u>	<u>Telephone</u>	<u>Relationship</u>
1. _____			
2. _____			
3. _____			

Of the following lists, please put a number "1" before those activities you can organize and teach as an expert, "2" for those activities in which you can assist in teaching and "3" for those which are just your hobby.

Arts and Crafts

- Ceramics
- Jewelry
- Nature Crafts
- Painting
- Photograph
- Printing
- Sculpture
- Sign Painting
- Sketching
- Wood Carving
- Woodworking

Dance

- Ballet
- Social
- Square
- Tap
- Aerobics

Dramatics

- Camp Shows
- Play Directing
- Skits & Stunts
- Puppertry

Nature

- Animals
- Astronomy
- Birds
- Conservation
- Flowers
- Forestry
- Insects
- Rocks & Minerals
- Trees & Shrubs
- Weather

Sports

- Archery
- Badminton
- Baseball
- Basketball
- Fishing
- Golf
- Gymnastics
- Lacrosse
- Miniature Golf
- Ping Pong
- Horseback Riding
- Riflery
- Roller Skating
- Soccer
- Street Hockey
- Tennis
- Track & Field
- Volleyball

Misc. & Hobbies

- Color War Leader
- Evening Programs
- First Aid
- Games
- Story Telling
- Model Building
- Rocketry
- Computers

Music

- Singing
- Piano
- Guitar
- Other (List)

Pioneering

- Hiking
- Outdoor Cooking
- Overnight Camping
- Scouting

Water Front Activities

- Canoeing
- Life Saving
- Rowing
- Swimming

Do you hold American Red Cross Certification as an ALS, Lifeguard or WSI? Date & location issued _____.

Indicate any condition or circumstance that might prevent you from fully carrying out the responsibilities of this position.

List teaching, coaching, leadership or other experiences that will support your application. (Example: CIT Diploma, Scouting etc.)

Have you ever been convicted of a crime? Yes ___ No ___ If yes, explain _____

COMMITMENTS REQUIRED FOR EMPLOYMENT

- | | | |
|---|-------------------|----|
| | CIRCLE ONE | |
| Willing to stay one twilight outing with group. | Yes | No |
| Willing and able to teach swimming daily in water. | Yes | No |
| Will attend a minimum of two pre-season in-service meetings – dates and times to be announced. | Yes | No |
| Willing to accept any age group as assigned by the camp, or to accept other program assignments as deemed in the best interest of the camp. | Yes | No |
| Available for the entire camp season and will make arrangements to deal with personal problems before or after camp. | Yes | No |

SENIOR STAFF ONLY

- | | | |
|--|-------------------|----|
| | CIRCLE ONE | |
| Will drive car route as assigned and will accept changes in route that are necessary and reasonable. | Yes | No |
| Willing to carry \$100,000 - \$300,000 liability insurance at personal expense. (Bus endorsement policy will be provided by camp at camp's expense.) | Yes | No |
| The camp insurance permits you to drive children and completely covers the driver and/ or owner of the vehicle. | | |
| Automobile Information: Year _____ Make _____ Model _____ Bucket Seats | Yes | No |
| Total number of seat belts including driver. _____ | | |
| Driver's License Number and State: _____ Is license valid at this time? | Yes | No |
| Have you, or are you, being charged with any motor vehicle violation or accident that may result in the loss of your license? | Yes | No |
| If yes, explain: _____ | | |

The information presented is truthful and accurate to the best of my recollection. Applicant may opt not to answer any and all questions without penalty.

JR/SR STAFF SIGNATURE

DATE