

Northeast Missouri 4-H Camp Committee
Camp Staff Application

Please Return to: **Rhonda Shafer**
Lincoln County Extension Office
 880 W. College
 Troy, MO 63379
 PHONE 636-528-4613
 FAX 636-528-7423
 E-MAIL shaferr@missouri.edu

Today's Date: _____

Drivers License #: _____ Social Security #: _____

Position(s) Applying for:

- Camp Assistant
 Program Director Craft Instructor
 Head Cook Kitchen Helper Health Aide

Name: _____
Last First Middle

Age: 16-17 18-20 21+

Permanent Address: (Please indicate which address you would like us to mail information)

(Street, Route, or Box) City State Zip Phone: () _____

Current Address:

(Street, Route, or Box) City State Zip Phone: () _____

E-mail Address: _____ T-shirt size: _____
(For a camp t-shirt.)

Have you ever been convicted of any felony? Yes No

Education:

School	Major Subjects	Years	Degree Granted

Camp Staff Experience: (list most recent first)

What is your experience as a camper?

Other Employment Experience:

Position	Employer	Address & Phone	Dates	Duties
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Waterfront Certification (for those applying for lifeguard or head lifeguard):

Lifeguard Training:

Type (Red Cross, YMCA, BSA, etc.) _____ Expiration Date: _____

Water Safety Instructor:

Type (Red Cross, YMCA, BSA, etc.) _____ Expiration Date: _____

List talents or skills you would be able to teach or share, related to the position and otherwise:

References: List three references, including former employers if possible. Do not list relatives.

Name	Address & Phone	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature: Please read carefully and sign.

I certify that the above statements are correct, and if employed, I understand any false information in this application, or its supporting documents, will be sufficient grounds for termination without notice. I further agree that all rules, orders and regulations of the Northeast Missouri 4-H Camp Committee affecting my employment shall constitute a part of my appointment or employment. My signature authorizes the Northeast Missouri 4-H Camp Committee to review my previous employment, criminal records, and other background data as it may relate to the positions(s) for which I am applying.

Signature

Date