

Employment Application

Complete this Application *completely* and *legibly*, then fax or mail. Attach a letter explaining why you are interested.

Personal Information

Full Name _____
SSN _____ Birthdate _____ Gender _____ Drivers License _____ State _____
Address _____ City _____ State _____ Zip _____
Email Address _____ @ _____
Telephone _____ Evening _____ Other _____
Doctor _____ Telephone _____ Last Tetanus _____
Applying for Position: Jr. Counselor Counselor Intern Volunteer Other _____
What dates are you available to: Start Work? _____ End Work? _____ Interview? _____
Have you ever been convicted of a felony? No Yes (Explain.) Have you ever been convicted of any sexual offense? No Yes (Explain.)

Education

School	Dates	Location	Major	Degrees
_____	_____	_____	_____	_____

Employment History

Employer	Dates	Position	Supervisor	Telephone
_____	_____	_____	_____	_____

Camp Experience

Program Name	Dates	Position	Supervisor	Telephone
_____	_____	_____	_____	_____

References

Name	Years Known	Relationship	Telephone
_____	_____	_____	_____

Notification & Authorization

I affirm that the information provided in this employment application is true and complete. I understand that any false information or omissions will be sufficient cause for dismissal without any obligation or liability to the Colonial Camp. I agree to immediately notify the Colonial Camp if I am convicted of a felony or any crime before or during my period of employment. I understand that this application does not, by itself, create a contract of employment. I understand and agree that, if hired, my employment is for no definite period of time, and may, regardless of the date of payments for services, be terminated at any time. I understand and agree that, if hired, I may be required to submit to a drug/alcohol test if the Colonial Camp determines it has a reasonable suspicion that I am using or under the influence of drugs or alcohol. I authorize the investigation of all statements contained in this application. I also authorize any person, school, current employer, past employer, physician and organizations who might know of my qualifications for employment to provide the Colonial Camp with relevant information and opinion that may be useful for a hiring decision, and I release such persons and organizations from any legal liability in making such statements. In connection with my application to become an employee or volunteer with the Colonial Camp, I understand that prior to or at any time after any acceptance of my application a Consumer Report may be requested by the Colonial Camp or a Reporting Agency from public records including but not limited to, Social Security number, motor vehicle operation history and criminal history to the extent permitted by law from various local, state and federal agencies. I voluntarily and knowingly authorize any law enforcement agency, state, local or Federal agency, personal reference, Reporting Agency, and/or any other persons to give records or information they may have concerning my criminal history, motor vehicle history, social security number or any other information requested. I understand that any Consumer Report or Investigative Consumer Report requested will be used strictly for the purpose of evaluation for employment.

Signature _____ Date _____



Colonial Camp

WEB: www.ColonialCamp.com EMAIL: information@ColonialCamp.com

PHONE: 866.354.6856 FAX: 877.354.6856

ADDRESS: 903 North McKay Avenue Dunn NC 28334