

2010 Summer Day Camp Employment Application

Kennett Area Park & Recreation Board

Applicant Name: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____
 Mobile: _____
 Email: _____

SSN: _____
 DOB: _____

KAPRB requires all camp staff to be at least 16 years of age by June 14th, 2010.
 Do you meet this requirement? Yes No

EDUCATION:

Last or Current School Attended: _____
 Major or Program Enrolled: _____
 Grade/Level Completed as of June 14, 2010: _____
 Diplomas or Degrees Held: _____
 If not in school, briefly describe what you have been doing since September 2009

Do you speak any languages other than English? If so, please list as follows:

Language: _____ Speaks Fluently Some knowledge
 _____ Speaks Fluently Some knowledge

SUMMER EXPERIENCE

Please list past summer work/volunteer activities:

2009: _____
 2008: _____

CAMP SKILLS

Camp Skill Areas: Please state your ability in each of the following areas by checking the appropriate number code beside the skills listed. This information will help us to determine your contribution.

Number Code: 1 = Can effectively teach the skill. 2 = Can effectively demonstrate the skill. 3 = Little or no experience.

Story Telling:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	Orienteering:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Crafts:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	Group Building:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Guitar Playing:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	Cooperative Games:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Sports:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	Song Leading:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

CERTIFICATION

Certification - If certified, please attach a legible copy as proof of certification.

References: On a separate sheet of paper, please list 2 individuals who will give a definite statement to your character, ability and work habits. Please include full name, phone number, years the person has know you and relationship.

I have personally completed this application form to the best of my knowledge and ability. I understand that misleading, incomplete, or non-factual information may disqualify me from consideration of employment, and that an offer of employment may be withdrawn at any time if information on this form is found to be misleading or non-factual. I have read and understand the conditions of employment for KAPRB Summer Camp.

Applicant's Signature: _____ Date: _____

Note: All Applicants will have a Criminal Reference Check performed with employment pending this procedure.

Please return this application to:
**KAPRB
 P.O. Box 308
 Kennett Square, PA 19348**