

# CAMP ROCKIN' U

## Cabin Leader Application

### Personal Information

Name		Date
Present Address		Telephone ( )
Permanent Address		Cell Phone ( )
Present Occupation	Year in School	Major
E-Mail		

Are 18 years old or older? Yes No

Are you legally entitled to work in the United States?  
*(If you are hired you will have to present evidence of your right to work in the United States no later than three days after the commencement of your employment)* Yes No

Are you willing to abide by our "No Alcohol, No illegal drugs" policy? Yes No

Are you willing to have your fingerprints taken and processed through state and federal agencies and/or submit to a background check conducted by an agency of our choice? Yes No

Dates Available: From To: \_\_\_\_\_

Best time to reach you: \_\_\_\_\_

Have you ever worked for Camp Rockin' U before? Yes No

Do you have any friends or relatives working for Camp Rockin' U or Environmental Alternatives?  
If yes, state name(s) and relationship. \_\_\_\_\_ Yes No

### Education

	Name of School	City, State	Degree/Major	Graduated?
High School				
College				
Grad School				
Other				

### Training and Certifications

	Agency	Place	Expiration Date
Leadership Course			
Lifeguarding			
Title 21			
Water Safety Instructor			
First Aid			
CPR			
RN			
WFR			
EMT			
Other			

The following activities are programs at Camp. Please check those that you have experience with.

Canoe	<input type="checkbox"/>	Jewelry Making	<input type="checkbox"/>	Nature	<input type="checkbox"/>
Kayak	<input type="checkbox"/>	Tie Dye	<input type="checkbox"/>	Astronomy	<input type="checkbox"/>
Paddle Boat	<input type="checkbox"/>	Painting	<input type="checkbox"/>	Environment	<input type="checkbox"/>
Swimming	<input type="checkbox"/>	Pottery	<input type="checkbox"/>	Maps and Compass	<input type="checkbox"/>
Fishing	<input type="checkbox"/>	Crafts	<input type="checkbox"/>	Outdoor Skills	<input type="checkbox"/>
Water Games	<input type="checkbox"/>	Singing	<input type="checkbox"/>	Outdoor Cooking	<input type="checkbox"/>
Slip N Slide	<input type="checkbox"/>	Playing an Instrument	<input type="checkbox"/>	Weird Science	<input type="checkbox"/>
Rock Climbing	<input type="checkbox"/>	Acting	<input type="checkbox"/>	Archery	<input type="checkbox"/>
Field Sports	<input type="checkbox"/>	Dancing	<input type="checkbox"/>	Riflery	<input type="checkbox"/>

**Please complete the following questions.**

Can you perform the functions of this job (essential and/or marginal) without accommodation? Yes No

Please describe your strengths. \_\_\_\_\_  
 \_\_\_\_\_

Please describe your weaknesses. \_\_\_\_\_  
 \_\_\_\_\_

What special skills, hobbies, or interests you have that make you uniquely qualified for this position? \_\_\_\_\_  
 \_\_\_\_\_

Why do you want to work for Camp Rockin' U \_\_\_\_\_  
 \_\_\_\_\_

Is there anything else you would like to add? \_\_\_\_\_  
 \_\_\_\_\_

**References**

Name	Address	Phone Number

I hereby authorize Camp Rockin' U to inquire and to verify any information contained on this application for employment and give permission to contact present and previous employers and additional references listed in this application or on any supplemental form. Camp Rockin' U shall not be liable for any damages that may result from such inquiry or verification. I understand that making any misleading or untruthful statement on this application may result in my dismissal. If accepted for employment I understand that the Immigration Reform and Control Act requires employers to obtain appropriate documentation. I understand that a certificate of satisfactory physical examination is a prerequisite to acceptance for employment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

RETURN TO: Camp Director  
 P.O. Box 39  
 Dobbins, CA 95935