

Kelleys Island 4-H Camp Return to: Beth Allie, Director Email to: campdirector@ki4hcamp.org

Employment Application

		Applicant Ir	nforma	ation						
Full Name:					Date:					
	Last	First			M.I.					
Address:	0									
	Street Address					Apartment/Unit #				
	City				State	ZIP Code				
Phone:			Email							
Date Availab (State From a		Security No.:			Desired	d Salary: <u>\$</u>				
Position App	lied for:									
Are you a citizen of the United States?		YES NO					NO			
Have you ev	er been convicted of a felony?	YES NO								
If yes, explai	n:									
Education										
High School:		Address:								
From:	To:	Did you graduate?	YES	NO	Diploma:					
College:		Address:								
	To:		YES	NO	Degree:					
Other:		Address:								
From:	To:	Did you graduate?	YES	NO	Degree:					
		Refere	ences							
Please list ti	hree professional references.									
Full Name:			Relation	ship:						
Company:					Ph	none:				
Address:										

Full Name:			Relationship:			
Company:			Phone:			
Address:						
Full Name:				Relationship:		
Componii				Phone:		
Address:						
		Employme				
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A alaba a a .						
Address:				Supervisor:		
Job Title:	Starting	g Salary:\$ Ending Salary:\$				
Responsibilities:						
From:	To:	Reason for Leaving:				
May we contact your p	previous supervisor for a reference?	YES	NO			
Company:				Phone:		
Address:				Supervisor:		
Job Title:	Starting	Ending Salary:				
Responsibilities:						
From:	To:	Reason	for Leaving:			
	previous supervisor for a reference?	YES □	NO 🗆			
	previous supervisor for a reference: perience and skills for a camp staff p	_	_			
	Disclaimer and	d Signatur	e			
I certify that my ansv	vers are true and complete to the best o	of my knowle	edge.			
may result in my rele	ds to employment, I understand that fa ease. You may sign this document elec- cally, you agree your electronic signatu	tronically by	typing your	name below. If you sign this		
Signature:				Date:		