

Southampton Summer Day Camp
Rick Blum, Owner/Director
Jacque Blum Owner/Director

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Southampton, PA 18966
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STAFF EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name _____ Social Security # _____
Home Address _____ City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____
Birthdate _____ Age _____ Email _____ @ _____
College Address _____ City _____ State _____ Zip _____

POSITION APPLYING FOR: _____

Available Positions: Bunk Counselor, Athletics, Swim Staff, Arts & Crafts, Outdoor Challenge, Tennis, Archery, Music, Theater, Dance, Maintenance, Riding, Lake

PLEASE PUT A **1** NEXT TO THE AGE OF CHILDREN YOU FEEL MOST COMFORTABLE WORKING WITH, A **2** NEXT TO THE SECOND MOST AND A **3** NEXT TO THE THIRD.

___ 3-5 ___ 6-7 ___ 8-10 ___ 11-12

TENTATIVE CAMP DATES FOR 2020—Monday June 22 – Friday August 14th

DO YOU HAVE ANY OBLIGATIONS THAT MAY REQUIRE TIME AWAY FROM CAMP? (Circle One) YES NO

IF YES, EXPLAIN _____

EDUCATION HISTORY: Name of School Major Date of Graduation

HIGH SCHOOL _____

COLLEGE _____

IF CURRENTLY IN SCHOOL GRADE/YEAR _____

CAMP STAFF EXPERIENCE:

<u>NAME OF CAMP</u>	<u>ADDRESS</u>	<u>DATES</u>	<u>POSITION</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Please distribute the SSDC Staff Reference Form to each of these individuals for their completion and return. The easiest way to do this is to paste the following link into an email so that they may complete the form in a timely manner: (link to reference form)

Your references WILL NOT automatically receive this link... Please provide it to them, and note that your application is not considered complete until ALL 3 references are submitted to us.

WRITTEN INTERVIEW QUESTIONS:

Why do you want to work at Southampton Summer Day Camp?

List 3 things you will contribute to the SSDC staff?

Did you go to summer camp? If so, what type and how long? What was your fondest memory?

What else would you like us to know?

HAVE YOU EVER BEEN CONVICTED OF A CRIME? Yes _____ No _____

IF YES, EXPLAIN _____

AGREEMENT

I hereby affirm that the information provided in this application and any submitted material is true and complete. I understand that any false or misleading representations or omissions may disqualify me from further consideration for employment and may result in discharge if discovered at a later date. I understand that completion of this application does not assure me of a position at Southampton Summer Day Camp. By signing below, I hereby give Southampton Summer Day Camp permission to investigate all information pertinent to my application in order to determine my qualifications for employment. I hereby authorize all persons and organizations having information relevant to my application to provide that information to Southampton Summer Day Camp. I understand that any offer of employment may be rescinded if my references are inadequate or unacceptable to Southampton Summer Day Camp. As a condition of my employment I must obtain all of the necessary clearances required by Southampton Summer Day Camp (Criminal Background Check, Child Abuse Clearance, FBI Fingerprint). If I am required to drive for camp my license information will be shared with our insurance company for verification.

SIGNATURE OF APPLICANT _____ DATE _____

Are you available for an interview? Yes _____ No _____

Best time and days to reach you _____