# Windham- Tolland 4-H Camp

326 Taft Pond Rd Pomfret, CT 06259

## **Application for Employment**

#### Must have cover letter

We consider applicants for all Positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation, or any other legally protected status.

Position applying for:	Date of Application:				
How did you learn abo	out us?				
Advertisement in		Friend _	Walk-in	Other	
Last Name		First Name		Middle	e Initial
Street Address	P.O. Box	City		State	Zip Code
Home Phone:	Cell	Phone:			
If you are Under 18 years of proof of you eligibility to v		ovide you required	1		YesNo
Have you ever filed an app If yes, give date		fore?			YesNo
Have you ever been emplo If yes, give date		?			YesNo
Are you currently employed?			YesNo		
May we Contact you present Employer?			YesNo		
Are you prevented from la country because of Visa or <i>Proof of citizenship or</i>	Immigration Statu	is?	upon employn	ient.	YesNo
On what date would you be	-	_			YesNo
Are you able to live at cam	ıp?				YesNo
Have you been convicted of a felony with in the last (7) Years? Conviction will not necessarily disqualify an applicant from employment. If yes, explain on a separate sheet of paper			YesNo		

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

### **EDUCATION**

	Name & Address of School	Course Studied	Years Completed	Diploma
				Degree
High School			From	
			То	
Undergraduate College			From	
			То	
Graduate			From	
Professional			То	
Other (Specify)			From	
			То	

### **EMPLOYMENT EXPERIENCE**

Start with your present or latest job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer	Dates Employed From To	Work Performed
Address	Hourly Rate/Salary Starting Final	
	Job Title Supervisor	
Telephone Number	Reason for Leaving	

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### \_References (at least 2 work related references)\_\_\_\_\_

1	( <b>A</b> Terres)	() Phone #
	(Name)	P none #
2.		( )
	(Name)	Phone #
3.		( )
J	(Name)	Phone #

#### **Other Qualifications**

Summarize special job-related skills, specialized training, and qualifications acquired from employment or other experience (i.e. sign language, CPR, First Aid)

List Professional, trade, business, or civic activities and offices held You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status

Please Explain any experience you have working with Children (If needed use additional sheet of paper)

### State any additional information you feel maybe helpful to us in considering you application

Number the following from 1-5 (1being the least knowledge- 5 being most knowledgeable{could teach}) Please number t he top (5) in each category

Arts	Camp Craft & Nature	Sports	Waterfront
Gimp/ Lanyards	Fire Building	Baseball/Softball	Kayak
Nature Crafts	Knots	Aerobics/Yoga	Canoe
Painting	Hiking/Backpacking	Archery	Swimming
Sketching	Orienteering	Basketball	Lifeguard (certified)
Pottery	Outdoor Cooking	Martial Arts	
Kitting/Crocheting	Animals/ Birds	Fishing	
Sewing	Conservation	Ping Pong	
Beading	Weather	New Games	Miscellaneous
Sculpture	Plants	Quiet Games	First Aid Certified
Vocal Music	Insects	Horseback Riding	CPR Certified
Musical	Environmental	Draft Horse Driving	Kitchen
Instrument	awareness		
Story Telling	Other:	Soccer	Cooking
Drama	4-H Projects	Tennis	Dishwashing
Other:	Vo-Ag Projects	Running	Other:
		Volleyball	
		Other:	

Please answer the following questions if needed use additional pieces of paper.

1. Why do you want to work with children?

2. Do you prefer to work with a group or alone? Why?

3. What is your definition of responsibility?

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? \_\_\_\_\_Yes \_\_\_\_\_No

## **Applicant's Statement**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand this application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time periods should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all the Policies & Procedures of Windham- Tolland 4-H Camp.

Signature of Applicant		Date		
	For Personnel Departme	nt Use Only		
Arrange InterviewYe	sNo			
1 <sup>st</sup> Interview Date: Time:	Interviewed by	Date		
2 <sup>nd</sup> Interview Date: Time:	Interviewed by	Date		
Remarks				
EmployedYes	No Date of En	nployment		
Job Title	Salary			
By Name & Position		Date		