

2019 CAMP APOLLO EMPLOYMENT APPLICATION



Return the application to:
G. Rosenbaum c/o Camp Apollo
P.O. Box 34
Plainview, NY 11803

Camp Apollo
516-938-2670
email: campapollo@verizon.net
www.campapollo.com

For office use only: New hire _____ Previous staff _____
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Date of Application: _____

(Please print or type)

Name: _____ Position applying for: _____

Present address: _____
Town State Zip code

Home phone number: _____ Cell phone number: _____

Email: _____

Date of Birth _____ Age _____ Do you have working papers? Yes _____ No _____

Single _____ Married _____ # of children _____ Age & sex of children _____

Do you have any condition that would restrict any physical activity? _____ If so, please explain: _____

Have you ever been convicted of a crime? _____ If so, please explain: _____

CAMP EXPERIENCE:

Have you previously worked at Camp Apollo? _____ When? _____

Position _____

Do you have previous camp experience? _____ When? _____

Position _____ Where? _____

SKILLS: Check items in which you feel you have some skills

Arts and Crafts _____ Athletic _____ Dance _____ Dramatics _____ Music _____ Other _____

What hobbies do you have? _____

Do you have swim certification? _____ American Red Cross Life Training? _____ CPR / AED? _____

Nassau County Certification? _____ Water Safety Instructor Certification? _____ First Aid? _____

Experience with children in schools, clubs, etc.: _____

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Name _____

EDUCATIONAL BACKGROUND

COLLEGE	PRESENT YEAR	YEAR GRAD.	DEGREE REC'D.	FIELD
HIGH SCHOOL	PRESENT GRADE	YEAR GRADUATED		

PAST WORK HISTORY: Provide a full record of all employment – paid or volunteer - and explain any gaps in employment. Include any positions on camp staff. Use a separate sheet, if necessary

Dates	Employer/Supervisor	Address, City, State, Zip Code & Phone #	Nature of work	Reason for Leaving

REFERENCES: Give names and addresses of three persons (not relatives) having knowledge of your character, experience, work habits and ability (please include address and phone number including area code)

Name & Relationship	Address, City, State, & Zip Code	E-mail address & Phone number
1)		
2)		
3)		

For office use only:

Initial _____ Ref.1. – Date: _____ Time _____ Spoke with _____

Years known _____ How known _____

Initial _____ Ref.2. – Date: _____ Time _____ Spoke with _____

Years known _____ How known _____

Initial _____ Ref.3. – Date: _____ Time _____ Spoke with _____

Years known _____ How known _____