

APPLICATION FOR EMPLOYMENT MJCC DAY CAMP



We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap or any other legally protected status.

PLEASE PRINT

Date of Application: _____

Name: _____
Last First Middle

Address: _____
City State Zip Code

Telephone: () _____ Social Security Number: _____

Cell phone: () _____ Email address: _____

Position Applying For:

_____ Sr. Counselor _____ Jr. Counselor _____ Specialist

Jewish Education:

School or Synagogue: _____ # of Years _____

Jewish Affiliation:

_____ Orthodox _____ Conservative _____ Reform _____ Other

If employed and you are under 18, can you furnish a work permit? Yes No

Have you filed an application here before? Yes No If Yes, what date? _____

Have you ever been employed here before? Yes No If Yes, what date? _____

Are you employed now? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

(Proof of citizenship or immigration status will be required upon employment)

On what date would you be available for work? _____

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SKILLS:

Place **TWO** (2) checks next to the activity, which you are able to lead. Place **ONE** (1) check next to the activity, which you are interested in and have some skill.

| | | |
|---|--|--|
| A. Arts & Crafts <input type="checkbox"/> Drawing <input type="checkbox"/> Ceramics <input type="checkbox"/> Crafts <input type="checkbox"/> Painting <input type="checkbox"/> Drawing <input type="checkbox"/> Model Making <input type="checkbox"/> Macramé <input type="checkbox"/> Carpentry <input type="checkbox"/> String Art <input type="checkbox"/> Candle Making <input type="checkbox"/> Tie-dying <input type="checkbox"/> Other: _____ _____ _____ | B. Sports/Games <input type="checkbox"/> Basketball <input type="checkbox"/> Baseball <input type="checkbox"/> Soccer <input type="checkbox"/> Gymnastics <input type="checkbox"/> Volleyball <input type="checkbox"/> Group Games <input type="checkbox"/> Football <input type="checkbox"/> Bowling <input type="checkbox"/> Horseback Riding <input type="checkbox"/> Archery <input type="checkbox"/> Hockey <input type="checkbox"/> Tennis <input type="checkbox"/> Other: _____ _____ _____ | C. Drama/Music/Dance <input type="checkbox"/> Acting <input type="checkbox"/> Stagecraft <input type="checkbox"/> Puppetry <input type="checkbox"/> Storytelling <input type="checkbox"/> Song Leadership <input type="checkbox"/> Ballet <input type="checkbox"/> Modern Dance <input type="checkbox"/> Tap Dance <input type="checkbox"/> Folk Dance <input type="checkbox"/> Israeli Dance <input type="checkbox"/> Hebrew Songs <input type="checkbox"/> Play a Musical Instrument (which) _____ Other: _____ _____ |
| D. Aquatics – Swim Skill Level <input type="checkbox"/> Non-swimmer <input type="checkbox"/> Beginner <input type="checkbox"/> Adv. Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Swimmer <input type="checkbox"/> L. G. T. <input type="checkbox"/> W. S. I. <input type="checkbox"/> Canoeing <input type="checkbox"/> Rafting <input type="checkbox"/> Other: _____ _____ _____ | E. Outdoor Skills <input type="checkbox"/> Nature Crafts <input type="checkbox"/> Camping <input type="checkbox"/> Cooking <input type="checkbox"/> Camp Crafts <input type="checkbox"/> Hiking <input type="checkbox"/> Tree I. D. <input type="checkbox"/> Plant I. D. <input type="checkbox"/> Ecology <input type="checkbox"/> Wildlife <input type="checkbox"/> Other: _____ _____ _____ | F. Miscellaneous <input type="checkbox"/> Cooking <input type="checkbox"/> Photography <input type="checkbox"/> Sewing <input type="checkbox"/> Current CPR <input type="checkbox"/> First Aid <input type="checkbox"/> Face Painting <input type="checkbox"/> Magic <input type="checkbox"/> Other: _____ _____ _____ |

EDUCATION:

| | Elementary | High | College/University | Graduate/ Professional |
|---|--|------------|--------------------|---------------------------|
| School Name | | | | |
| Years Completed/ Degree | 4 5 6 7 8 | 9 10 11 12 | 1 2 3 4 | 1 2 3 4 |
| Diploma/Degree | / | | | |
| Describe Course of Study | / | | | |
| Describe Specialized Training, Apprenticeship, Skills & Extra-curricular Activities | _____ _____ _____ | | | |
| Honors Received | State any additional information that you feel may be helpful to us in considering your application. _____ _____ _____ | | | |

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EMPLOYMENT EXPERIENCE:

Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names, which indicate race, color, religion, gender, national origin, handicap or other protected status.

| | | | |
|---------------------------|-----------------------------|-----------------------|----|
| Employer | Telephone () | Dates Employed | |
| | | From | To |
| Address | | | |
| Job Title | Hourly Rate/Salary | | |
| | Starting | Final | |
| Supervisor | | | |
| Reason for Leaving | Job Responsibilities | | |
| _____ | _____ | | |
| _____ | _____ | | |
| _____ | _____ | | |

| | | | |
|---------------------------|-----------------------------|-----------------------|----|
| Employer | Telephone () | Dates Employed | |
| | | From | To |
| Address | | | |
| Job Title | Hourly Rate/Salary | | |
| | Starting | Final | |
| Supervisor | | | |
| Reason for Leaving | Job Responsibilities | | |
| _____ | _____ | | |
| _____ | _____ | | |
| _____ | _____ | | |

GENERAL CAMP INFORMATION:

1. Did you attend camp as a camper? Which one and for how many years? _____

2. Why do you want to work at the MJCC Camps? _____

3. What is your greatest personality asset working with kids? _____

4. Why should we hire you as a Camp staff member? _____

5. Describe yourself in five (5) words or less: _____

6. What motivates you? _____

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REFERENCES:

Please list at least three (3) non-relative references (Employers, teachers, adult friends, counselor, etc.)

| NAME | ADDRESS/PHONE | RELATION TO APPLICANT |
|------|---------------|-----------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

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.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that effect is executed by the employer and employee in writing.

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 rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks: _____

Interviewer Date

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Department _____

By _____ Date _____
Name and Title