

**RETURNING STAFF APPLICATION, SUMMER 2019
CAMP SHOHOLO**

105 Weber Road Greeley, PA 18425

Telephone: 570-371-4760 Fax 570-504-1702 E-mail: duncan@shohola.com
www.shohola.com

Name _____ Social security # _____

Permanent address:

| | | | |
|-----|--------|------|-------|
| Zip | Street | City | State |
|-----|--------|------|-------|

| | | |
|---------------------|-----------|--------|
| Country (if not US) | Telephone | E-mail |
|---------------------|-----------|--------|

Birth date _____ Age as of July 1, 2019 _____
month / day / year

In emergency, contact _____

| | |
|-----------------------|-------|
| Name and relationship | Phone |
|-----------------------|-------|

Present occupation _____

Level of education completed by July 1, 2019 _____

| | | | |
|-------------------|-------|----------------|----------------|
| School or College | Major | year completed | degree granted |
|-------------------|-------|----------------|----------------|

Indicate any conditions that would limit your work _____

Do you have a criminal record, been arrested for child abuse/sexual assault? _____
If yes, explain _____

Do you have a current drivers license? _____
Number state

Are you willing to transport campers in camp vans to various activities? _____

***** Very important***** Will you be present for the entire camp season? (**June 11 – August 11, 2019**) _____

If not, indicate anticipated dates of absence. _____

Note: Camp **MUST** know about anticipated dates of absence **BEFORE** we can sign a contract with you. First priority for positions WILL BE GIVEN to those who can attend the entire summer. *****VERY IMPORTANT*****

What age campers do you prefer to supervise? _____

*****VERY IMPORTANT *****In which Department would you most like to work?-

Indicate your top **6** activities, **in order**, of your interest and ability to teach. (1 being best and 6 being least)

- 1)
- 2)
- 3)
- 4)
- 5)
- 6)

Other activities of interest _____

Current qualifications, certifications, licenses?

Advanced lifesaving A.R.C. Small craft canoe C.P.R.
 First aid Horseback riding W.S.I.
 Riflery / Archery Lifeguard training Other _____

Salary expected _____.

By signing this application, you are giving Camp Shohola the right to do a criminal background check and a check of the national sex offenders registry.

Signature _____

Date _____

RETURN THIS FORM TO: Duncan Barger
7908 Fawnwood Lane
Tega Cay SC 29708

Or by email to duncan@shohola.com

Telephone (570) 371-4760 Fax (570) 504-1702 Email duncan@shohola.com