



Office Use Only

Date Rec'd _____
 1st Interview _____
 References checked _____

1001 Deming Way, Madison, WI 53717
www.swimwest.com 608-831-6829

APPLICATION FOR SUMMER CAMP POSITIONS

Swim & Gym All Sports Camp maintains a policy of non-discrimination for all employees and applicants in every facet of the company's operations. In compliance with the Federal and State Laws, Swim & Gym All Sports Camp, hires, trains, and promotes all qualified employees without unlawful discrimination on the basis of race, color, sex, religion, citizenship, origin, or any other trait as covered by State and/or Federal Law.

Last Name		First	Middle	Date of Birth
Street Address				Home Telephone ()
City, State, Zip				Cellular Telephone ()
Form of Transportation				Social Security #
Have you ever been convicted of a crime? <input type="checkbox"/> YES <input type="checkbox"/> NO Please describe the nature of the conviction and the date of the conviction.				Who referred you to us?
Are you legally authorized to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO Note: If you are hired you will be authorized to furnish proof of eligibility.				When will you be available to begin work?
What is the maximum number of hours you can work?			What is the minimum number of hours you can work?	
Please indicate which position(s) you are applying for: Camp Director / Camp Coach / Camp Counselor				

SHIFTS

Counselors are required to work Monday – Friday 8:00am-3:45pm, in addition to a 1 hour weekly staff meeting. Counselors are able to obtain their full 40 hours per week by assisting with before and after care between the hours of 7:30am-8:00am and/or 3:30pm-6:00pm. All applicants must be able to work the full 11 weeks of camp, in addition to the required training.

EDUCATION

School	Name & Location of School	Major/Minor	No. of Years Completed	Graduate? YES or NO
High School				
College				
Graduate				

CERTIFICATIONS

CPR/First Aid	Expiration
WSI	Expiration
Life guarding	Expiration

EXPERIENCE

Years of Camp Experience:	Type of Experience-Circle all that apply Day Camp / Overnight Camp / Sports Camp
Ages Taught-Circle all that apply Infants / Children Ages 5-6 / Children Ages 7-8 / Children Ages 9-10 / Children Ages 11-13	

Please list any other special training or skills

Please list your memberships in Professional or Civic Organizations

EMPLOYMENT HISTORY

Company Name	Telephone ()
Address	Employed-Starting/Ending (month & year)
Name of Supervisor	May we contact? YES or NO
State job title and describe your responsibilities	Starting Pay or salary: Ending Pay or salary: Reason for leaving

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PERSONAL REFERANCES-Not spouse or relatives

Name	Title	Telephone ()	Alternate ()
Company		Relationship	

Name	Title	Telephone ()	Alternate ()
Company		Relationship	

Name	Title	Telephone ()	Alternate ()
Company		Relationship	

CAMP PROGRAM SKILLS

On a scale of 1 to 3: circle the areas which you have knowledge (1= interest, 2=experience playing, 3=experience teaching)

Swimming:	1	2	3	Football:	1	2	3
Gymnastics:	1	2	3	T-Ball:	1	2	3
Soccer:	1	2	3	Tennis:	1	2	3
Basketball:	1	2	3	Hiking:	1	2	3
Volleyball:	1	2	3	Field Sports:	1	2	3
Baseball:	1	2	3	Team Sports:	1	2	3

CANDIDATE QUESTIONS

1. What contributions do you think you would bring to the Swim & Gym All Sports Camp?

2. Describe a school/work project that you were proud to work on.

3. If you were working with your group of campers and one of your children began crying, what would you do?

4. Describe your favorite and least favorite jobs and why.

5. Have you ever been a member of a club or organization which you dropped out of? Why did you drop out?

6. In 15 words or less, why should we hire you? What makes you an asset to an employer?

APPLICANT ACKNOWLEDGMENT

I certify that the information in this application is accurate, current, and complete. I understand that misstatements or omissions may result in disqualification from further consideration or termination.

I authorize Swim & Gym All Sports Camp to investigate my employment history, credentials, and to obtain any relevant information needed to make an employment decision, including a drug test. I hereby authorize my prior employers to release any and all information relating to my employment and I release Swim & Gym All Sports Camp and previous employers from any and all liability that may result from the release and or use of such information.

I understand and agree that nothing contained in this employment application, granting of an interview, or scheduling training creates a contract for employment between Swim & Gym All Sports Camp and myself. If an employment relationship is established, I understand that my employment will be terminable “at will”, meaning I have the right to terminate my employment at the end of a session and that Swim & Gym All Sports Camp has that same right.

Applicant’s Signature_____

Date_____