

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 Summer 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 Summer Camp**, hires, trains, and promotes all qualified employees without unlawful discrimination on the basis of race, 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 Code			Cellular Telephone
Email			
Form of Transportation			Social Security #
Have you ever been convicted of a crime Please describe the nature of the conviction		ion.	Who referred you to us?
Are you legally authorized to work in the Note: If you are hired you will be authorized			When will you be available to begin work?
What is the maximum number of hours	you can work?	What is the minimum hours of	f hours you can work?
Please indicate which position(s) you ar	e applying for:	Camp Director / Camp C	Counselor

SHIFTS

Counselors are required to work Monday-Friday 8:00am-3:45 pm, 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

CLRITIONIO	
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-	3 / Children Ages 9-10 / Children Ages 11-13
Please list any other special training or skills	
a remove and any output of court or maning or ordinary	
Please list your memberships in Professional or Civic Organizat	ion
EMPLOYMENT HISTORY	
Company Name	Telephone ()
Address	Employment - Start-End (month/year)
Name of Supervisor	Starting Pay/Salary: Ending Pay/Salary:
State Job Title and describe responsibilities	Reason for Leaving
Company Name	Telephone
	()
Address	Employment - Start-End (month/year)
Name of Supervisor	Starting Pay/Salary: Ending Pay/Salary:
State Job Title and describe responsibilities	Reason for Leaving
Company Name	Telephone
	()
Address	Employment - Start-End (month/year)
Name of Supervisor	Starting Pay/Salary: Ending Pay/Salary:
State Job Title and describe responsibilities	Reason for Leaving

PERSONAL REFERENCES - Not Spouse or Relatives

Name		Title		Telephone		Alternate	
Company				Relationship)	,	
Name		Title		Telephone		Alternate	
Company				Relationship)		
Name		Title		Telephone		Alternate	
Company				Relationship)	()	
	ROGRAM SK		a lemanula desa	(1 interest	2	~ 2 ozwaniana o too	ala i m a
	1 to 3: circle the area	s in which you have	e knowleage	Football:	2=experience playing	g, 3=experience tea	cning
Swimming:	1	2	3	rootban:	1	2	3
Gymnastics		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 Summer 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 drop	ped out of? Why did you drop out?
6. In 15 words or less, why should we hire you? What makes you an asset to	o an employer?
APPLICANT ACKNOWLEDGMENT	
I certify that the information in this application is accurate, current omissions may result in disqualification from further consideration	_
I authorize Swim & Gym Summer Camp to investigate my employr information needed to make an employments decision, including to release any and all information relating to my employment and employers from any and all liability that may result from the release	a drug test. I hereby authorize my prior employers I release Swim & Gym Summer Camp and previous
I understand and agree that nothing contained in this employment ing training creates a contract for employment between Swim & Crelationship is established, I understand that my employment will terminate my employment at the end of a session and that Swim &	Gym Summer Camp and myself. If an employment be terminable "at will", meaning I have the right to
Applicant's Signature	Date