



**SHADY OAKS CAMP
EMPLOYMENT APPLICATION**

Name _____ Social Security Number _____ - _____ - _____

Address _____

Telephone _____ Email Address _____

Highest Grade Level Achieved _____

Name of School Attending _____

Are you over Age 18? YES NO

Have you ever been convicted of a felony? YES NO

If Yes, please explain _____

Do you have a current CPR certificate? YES NO (If yes, then please send a copy with your application)

Position applying for _____

Do you have any Physical, Mental or Medical Impairments which could affect your employment? YES NO

If Yes, please explain _____

**EMPLOYMENT EXPERIENCE
(Different then Shady Oaks Camp)**

Employer Name _____

Employer Address _____

Employer Telephone _____ Dates Employed _____

Position Held _____

Brief Job Description _____

Please send one written reference from an employer or school official along with your application.

I hereby affirm that the above information is complete and accurate. I understand that any false information provided on this application is grounds for denial or termination of employment.

Signature _____

Date _____