Spring Farm	TWIN SPRING FARM DAY CAMP 1632 East Butler Pike, Ambler, PA 19002 (215) 646-2665 EMPLOYMENT APPLICATION				
Day Camp					
Date of this application:	Positio	on applying for:			
Name:	first	M.I.	(nick name)	Age	Sex
Permanent address:					
city		state	zip		U.S.?
Home Phone:		Cell Phone:			
email address			Social Security Number	·	
Marital status: 🗖 Single	Married	Divorced	Separated	<b>D</b> w	idowed
Number of children Nan	nes & ages				
Referred by: (name) Friend  ☐ Family  ☐ Staff					
Date you can start    Last date you can work    Salary desired \$					
Are you employed now? If so, may we inquire of your present employer?					
Present employer					
Employer address & telephone #	Street		city st	ate zip	phone
Have you applied here before?	Do you	know anyone employ	ed by us?		
If so who?					
<b></b>		<b>EDUCATION</b>			
Provide dates you attended sch	ool:		M	onth	Year
High School Name			From	Т	0
College Name			From	Т	0
Course of Study					
Diplomas/Degrees					
Special training/skills					
What foreign languages, if any, d U.S. Military Service	o you speak/read/ Rank	/write? Present Membership	·		
Honors received List membership in any organizations, clubs, charities and school/community programs:					

What are outstanding things about you that will be of special	benefit to our camp?	What contribution do y	ou think a well
run camp can make to children?			

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Please describe your experiences and what you enjoyed about working with children which might have a bearing on this
application.

## **SWIMMING INFORMATION**

Check one:	Non-swimmer 🗖	Average	swimmer 🗖	Strong s	wimmer 🗖
Senior Lifesaving?	YES 🗖 NO 🗖	Year W.S.I.	YES 🗖 NO 🗖	Year Active:	YES 🗖 NO 🗖
Have you ever instr	ucted swimming bef	iore? YES 🗖 NO 🗖	Where?		When?
Give details of swim	instructing experie	nce			
Ages taught	Number c	of children instructed _	Туре	of lessons given	
	EMPLOYMENT INFORMATION				

Please give your accurate, complete, full time and part time employment record. Start with present or most recent employment and activities when unemployed. Please give time frame of last 5 years.

Date	(Month/Year)	Name-Address-Phone #	Salary/Position	Reason for leaving
From	То			

## PREVIOUS CAMP EMPLOYMENT

Date	(Month/Year)	Camp Name	Salary/Position	Reason for leaving
From	То			
From	То			
From	То			

## **REFERENCES**

Give below the names of 3 persons not related to you, whom you have known for at least 1 year preferably employer, former teacher.

1				
	Name	Relationship	Length of relationship Phone #	
2.				
_	Name	Relationship	Length of relationship Phone #	
			<b>.</b> .	
З.				
	Name	Relationship	Length of relationship Phone #	

If a position is not available at this time, do you wish your application to be held for future employment? Yes D No D PHYSICAL RECORD

Were you ever injured? Give details.

Have you any impairments in hearing / vision / speech \_\_\_\_\_

Have you ever been convicted of any crimes, or offenses, including child related offenses? Yes D No D

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at anytime without any previous notice, if my conduct or ethics are unprofessional or detrimental to the camp. I will submit genuine documentation that establishes my identity and authorization to be legally employed within the United States, and the required Criminal History Record under Act 34 of 1985 and the Pennsylvania Child Abuse History clearance. I understand Twin Spring Farm reserves the right for employee to undergo and pass a screening for alcohol and/or drugs.

Signature	Date
Do not write in this	space
Interviewed by Date	
Application should be: Considered for employment	Put in active file  Put in inactive file
Employee Status: Hired 🗆 🛛 Full time 🗇 Part time 🗅	Starting date Wage

On the following list, please check each activity you are familiar with, have the knowledge and skill to organize, lead or teach those activities.

Check all that apply.	$\checkmark$	Check all that apply.	$\checkmark$	Check all that apply.	$\checkmark$
ARCHERY		GYMNASTICS		VOLLEYBALL	
ARTS & CRAFTS		MUSIC		WOOD WORKING	
BOARD GAMES		NATURE		Certifications Held	
CHEERLEADING		PICKLEBALL		C.P.R.	
CHESS/CHECKERS		PHOTOGRAPHY		C.D.A.	
CERAMICS		PUPPETRY		ARC Life Saving	
DANCE		ROPES COURSES		High Ropes Course	
DISK GOLF		ROCK CLIMBING		Rock Climbing	
DRAMA		SPORTS			
FOOT GOLF		STORY TIME		Special Talents	
GAGA		SWIMMING		Acting experience	
GAMES		TENNIS		Play Musical Instrument	
GIMP/MACRAME		TETHERBALL		Singing	

Pease write in any activities not listed above that you have specific knowledge and skill to organize, lead, or teach those activities. Also, add any special knowledge or talents not listed that you have and feel would benefit the program and campers.