APPLICATION FOR EMPLOYMENT

CAMP RUACH

@ Congregation Etz Chaim Lauren Chernau 1190 Indian Hills Parkway - Marietta, GA 30068 770.977.3384 - www.etzchaim.net - lauren@etzchaim.net

You must be 18 years or older to be considered for a Senior Counselor position.

Contact Information

| Applicant's Full Name: | | Date of Birth: | | | |
|------------------------|-----------------------------------|---|---|--------------|-----------|
| Current | Grade: | or College Name: | Year | :: Major: | : <u></u> |
| | | | | | |
| Full Hon | ne address: | | | | |
| Cell phor | ne #: | | Home phone #: | | |
| In case of | f emergency pl | ease list an emergency co i | ntact: | | |
| | | | Email: | | |
| | | | Cell phone #: | | |
| How did | you hear abou | t Camp Ruach? | | | |
| Worl | k Schedu | ıle | | | |
| _ | n daily. <i>Schedu</i> | s. Any dates you are sched les will be set after the intervio | ew process. You may or n 3 Days a Week | _ | |
| | 1 | June 2* – June 6 | If other than M/W/F, please indicate. | | _ |
| | 2 | June 9 – June 13 | | | |
| | 3 | June 16 – June 19* | | | |
| | 4 | June 23 – June 27 | | | |
| | 5 | June 30 – July 4* | | | |
| | 6 | July 7 – July 11 | | | |
| | 7 | July 14 – July 18 | | | |
| | 8 | July 21 – July 25 | | | |
| | 9 | July 28 – July 30 | | | |
| | *We will be cl | osed June 2 nd & 19 th , also closed | July 4 th | | |
| ☐ I am i | interested in w | orking before care starting | at 8:00am or am availa | ble starting | |
| | interested in w open until 5pm | orking aftercare and am av daily) | ailable until | | |

| We cannot guarantee your first choice, but, rank your a | age preferenc | es 1 being your favorite age group: | |
|---|---|---|--|
| 14 months – 2 years | 3 years – 4 years 4 years – 5 years/Rising K | | |
| 2 years – 3 years | | | |
| Staff training will be held on May 27 th – May 30 th from June 1 st from 10:30a – 12p. | m 9-2 daily | An Open House will be held on the | |
| Please check that you will be available for these manda | ntory sessions | i. | |
| Training Sessions & Open House 5/27 - 5/30 & 6/1 | | <u> </u> | |
| Personal Camp Experiences (You may a | attach additiona | l pages if necessary) | |
| Have you ever been a <i>camper</i> in a day camp? | Yes | No | |
| Have you ever been a <i>camper</i> at an overnight camp? | Yes | No | |
| Please describe your experience as a <i>camper</i> i.e. favorit dislikes, etc. | te experiences | s, activities, worst experiences, likes | |
| Work Experience (You may attach additional page | | | |
| Have you ever worked in <u>any</u> day camp setting? | Yes | No | |
| If yes, Where? | | | |
| What was your job title? Name, email and/or phone number of immediate supers | | | |
| | | | |
| Describe your experience and responsibilities in the car | np setting: | | |
| | | | |
| Additional Work Experiences (You m | nay attach additi | onal pages if necessary) | |
| Have you ever worked with young children ages birth | to six years o | ld? Yes No | |
| If yes, Where? | When? | | |
| What was your job title? | | | |
| Who was your immediate supervisor? | | | |
| Email and/or phone number of supervisor: | | | |

Describe your experience and responsibilities in the camp setting:

Other Volunteer Experiences (if applicable): Place of Employment: Job Title: Immediate Supervisor: E-mail and/or phone number of Supervisor: Describe your experiences and responsibilities: Other Information Why would you be a good candidate to work at Camp Ruach this summer?

Do you have any special skills that you could share at camp?

Do you have any physical or medical limitations that would impact your ability to work with young

children? (i.e. knee injury, unable to lift heavy objects, tc.)

If you are a college student, please indicate when you will be in the area to interview _____

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|------|---|----|---|
| | | | |

References

All applicants must provide 3 references who are not family members. They should be able to share information regarding your work ethic, performance, personal character and reliability. These individuals may be employers, teachers, supervisors, adult family friends, or other adults who will sing your praises! By signing your application, you give us permission to contact these individuals.

| Reference #1: | | |
|--|------------------------|--|
| Name: | Title (if applicable): | |
| Relationship to Applicant: | | |
| Telephone Number: | E-mail Address: | |
| Reference #2: | | |
| Name: | Title (if applicable): | |
| Relationship to Applicant: | | |
| Telephone Number: | E-mail Address: | |
| Reference #3: | | |
| Name: | Title (if applicable): | |
| Relationship to Applicant: | | |
| Telephone Number: | E-mail Address: | |
| Thank you very much for your interest in worki | ng at Camp Ruach! | |
| Please return this application to: | | |
| Camp Ruach! @Congregation Etz Chaim Lauren Chernau, Preschool Director 1190 Indian Hills Parkway Marietta, GA 30068 | | |
| Applicant Signature | Date | |
| Parent/Guardian Signature (If applicant is under 18 years old) | Date | |

10-YEAR EMPLOYMENT HISTORY

| Name | Ac | Address | | |
|---|--|-------------------|--------------------|--|
| Record of Employment: (If unemployed between | Past 10 years 2 jobs/dates, write "no work" | '. Leave no gaps) | | |
| Month/Day/Year | Name and address of Employer | Position | Reason for leaving | |
| From To | Employer | | | |
| From To | | | | |