

FUMC Summer Day Camp

Employment Application

		Арр	licant l	ntorma	ation			
Full Name:							Date:	
	Last	First	t			М.І.		
Address:								
	Street Address						Apartment/Unit #	
	City					State	ZIP Code	
Phone:				Email				
T Hone.			'					
Dates availa	able:							
Specific date would be <i>unavailable:</i>	-							
Are you a ci	tizen of the United States?	YES		lf no, a	are you a	uthorized to wo	YES rk in the U.S.?	
Have you ev	ver worked at this camp before	YES ?		If yes,	when?			
Have you ev	ver been convicted of a felony?	YES	NO					
lf yes, expla	in:							
			Educ	ation				
High Schoo	bl:		Address:					
riigii Schot	л		Auuress.					
From:	То: [Did you gi	raduate?	YES				:: <u></u>
								-
College:		·	Address:					
From:	To: [Did vou a	raduate?	YES		Degree:		
	10 1	ora you gi	addate .					
Other:		/	Address:					
From:	То: [Did you gi	raduate?	YES		Degree:		
			Refere	ences				
Please list t	three references.							
						Relations	hip:	
Company.						Ph	one:	

Address:						
Full Name:	II Name:R					
Company:			Phone:			
Address:						
Full Name:		Relationship:				
Company:			Phone:			
Address:						
	Previous	Employment				
Company:			Phone:			
Address:			Supervisor:			
Job Title:	Startir	ng Pay: <u>\$</u>	Ending Pay: \$			
Responsibilities:						
From:	То:	aving:				
May we contact your p	revious supervisor for a reference?		NO			
Company:			Phone:			
A . I . I			0			
Job Title:	Startir	ng Pay: <u>\$</u>	Ending Pay: <u>\$</u>			
Responsibilities:						
From:	To:	Reason for Le	aving:			
May we contact your p	revious supervisor for a reference?	YES M	NO			
Company:			Phone:			
		Ending Pay:				
	To:		aving:			
			-			
May we contact your pl	revious supervisor for a reference?					

Related Experience

Describe any other related experience (volunteer/service work, babysitting, extra-curricular activities)

Skills, Interests, Abilities

Please circle the activities that you have experience in.

Sports and Fitness								
Swimming Tennis Volleyball Zumba	Gymnastics Skateboarding Baseball Lacrosse	Karate Golf Soccer Cheerleading	Softball Ultimate Frisbee Yoga/ Pilates Other	Basketball Flag Football Aerobics				
Applied Arts								
Photography Scrapbooking	5 1 5		Woodworking Other					
Performing Arts								
Dance Guitar	Theatre Other	Musical Theatre	Singing	Piano				
Certificates Do you have any of the following certificates? Please circle all that apply								
First Aid	CPR	Life Guard	Other					
Other Nursing Student	Nurse	Education Student	Teacher	Substitute Teacher				
What particular strength do you feel you have that you would bring to the position?								
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I heard about FUMC Summer Day Camp through _____

I authorize First United Methodist Church to conduct a criminal background check and to request or receive any information including past employments, education and/or references from any persons, schools, or previous employers.

I assure that all the information provided on this application for is accurate and truthful. I understand that if employed they will become part of my personnel files and that any miss-statement of fact on this and other application forms may be cause for immediate dismissal.

Applicant Signature

Date

Submit application to the church office or by email to jeanne@lagrangefumc.org