Rural Action

9030 Hocking Hills Drive The Plains, Ohio 45780 Ph. 740.677.4047

Jr. Counselor Application

	or print)	Date of Application				
Name						
Permanent Ad	Idress	umber	City		State	Zip
Preferred Pho	ne		·			•
Phone		Fax		E-mail		
Birthday (Mo	nth/day/ year)://	Age:				
Dates availabl	le: From	То				
What is your o	current age and grade in sch	ool?				
Can you perfo	orm the essential functions o	f the job for which y	ou have applied,	with or witho	ut reasonable accomn	nodation?
		Yes	No			
	listory: Provide a full record ositions on camp staff. Use			teer – and exp	lain any gaps in empl	oyment.
Dates	Employer / Supervisor		dress & Phone		Nature of Work	Reason for Leaving
					_	
					1	
[1]		4				
indicate any e	employer you do not wish us	to contact, and the r	eason			

References: Give names and addresses of one person [not relatives] having knowledge of your character, experience, work habits and ability.

Name	Address & City	Phone
How did you hear about the Jr. Counselor Po	esition?	
hat contributions do you think you can make a	at camp?	
What are you hoping to gain from this experien	ence?	
hat are some of your favorite nature related ac	ctivities and hobbies that you enjoy?	
		
connection with the same. I understand that, if en status. Furthermore, I understand that any agree	, including any checks of criminal records, and rele nployed, I will be an at-will employee unless there ment must be in writing and signed by the designat n or in other documents completed by the applicant	is an agreement or law, which alters that ted camp official. I also understand that
Signature		Date
Signature of Parent/Guardian		Date
Printed Name of Parent/Guardian		Date

