

New Staff Application

KCC SUMMER DAY CAMP
Kensington Community Council
59 Arlington Ave.
Kensington, CA 94707
(510) 525-0292

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Age: _____ Date of birth: _____ Telephone: _____ E-mail: _____

Position applying for: _____

EMPLOYMENT & GROUP WORK EXPERIENCE (please list camp and youth guidance experience)

Position	Employer Name	Employment Dates	Salary	Supervisor's Name	Telephone #
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1. _____

Responsibilities: _____

2. _____

Responsibilities: _____

SKILLS & INTERESTS

Are you Red Cross First Aid Certified? _____ Expiration Date: _____

Are you Red Cross CPR Certified? _____ Expiration Date: _____

Do you have a Red Cross Lifesavers Card? _____ Expiration Date: _____

Do you have a valid Driver's License? _____ Expiration Date: _____

Skills & Experience (please check areas where you have skills.)

<input type="checkbox"/> Group Games	<input type="checkbox"/> Crafts	<input type="checkbox"/> Juggling
<input type="checkbox"/> New Games	<input type="checkbox"/> Tie Dye	<input type="checkbox"/> Magic
<input type="checkbox"/> Indoor Games	<input type="checkbox"/> Nature Crafts	<input type="checkbox"/> Storytelling
<input type="checkbox"/> Field Games	<input type="checkbox"/> Weaving	<input type="checkbox"/> Cooking
<input type="checkbox"/> Tennis	<input type="checkbox"/> Drawing	<input type="checkbox"/> Other

REFERENCES

List four people (not relatives) who have knowledge of your background and experience.

Name	Daytime Phone #	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

To the best of my knowledge, the information provided in this application is true and correct, and I have notified the KCC office of any special circumstances that would affect my work.

Signature of Applicant

Date

For office use only

Interview Date: _____ *Position:* _____ *Salary:* _____

Comments: _____
