



Please Return to:  
 Lisa Guerrero  
 Jewish Community Center  
 12500 N.W. Military Hwy  
 San Antonio, TX 78231

**CAMP STAFF APPLICATION** (Please Print NEATLY or Type) Date of Application \_\_\_\_\_

**Camp staff dates of employment: June 6- August 4, 2017**

Name \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Summer Address \_\_\_\_\_  
 Street and Number City State Zip

E-Mail Address \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Emergency Contact Number \_\_\_\_\_

Are you at least 18 years of age?  Yes  No If not, state your age \_\_\_\_\_ T-shirt size \_\_\_\_\_  
 (Adult men's sizes)

Do you drive?  Yes  No Valid driver's license?  Yes  No State \_\_\_\_\_

**EDUCATION**

Years	School	Major Subjects	Degree Granted

**JEWISH EDUCATION** \_\_\_\_\_

**PAST EMPLOYMENT (List previous two summers or years)**

Dates	Employer	Address	Phone	Nature of Work	Reason for leaving

Indicate any employer you do not wish us to contact and the reason \_\_\_\_\_

**CAMP EXPERIENCE**

Dates	Camp	Address	Director	Camper or staff?

REFERENCES (Give names/addresses of 2 persons (not relatives) having knowledge of your character, experience and ability i.e., instructor, advisor, Camp Director, etc.)

Name	Relationship	Phone

Indicate in the box, activities you can organize, design, and/or teach. Leave "blank" in areas you know little about.

Arts/ Crafts	Sports	Play an instrument? What?
Cooking/ Nutrition	Aquatics	Any other special skills? (sewing, etc)
Science/ Nature	Song leader/ Music	Speak any other languages? What?
Camping/ Outdoor life skills	Dancing	Any experience with children with special needs?
Israeli / Jewish Programs	Dramatics	Certifications? (CPR/1 <sup>st</sup> aid, etc)

**NEW APPLICANTS ONLY:** What qualities do you possess that would make you a good camp staff person? \_\_\_\_\_

\_\_\_\_\_

What age groups (K-9<sup>th</sup> grade) would you feel most comfortable working with? \_\_\_\_\_

\_\_\_\_\_

**RETURNING STAFF ONLY:** Why do you want to return to J Camp? \_\_\_\_\_

\_\_\_\_\_

If hired, I understand I must be available for the following:

- |   |  |
|---|--|
| <input type="checkbox"/> Staff Training week (June 6-9, 9am-5pm)                  | <input type="checkbox"/> 2 Family Nights (extended camp days)                |
| <input type="checkbox"/> Session 1 (June 12-July 7, M-F 8:45am-3:45pm)            | <input type="checkbox"/> Staff Meetings (after camp each Monday*3:45-4:45pm) |
| <input type="checkbox"/> Session 2 (July 10-Aug. 4, M-F 8:45am-3:45pm)            | <input type="checkbox"/> Overnights (depending on age group)                 |
| <input type="checkbox"/> A two-week late-stay shift over the course of the summer |  |

I authorize investigation of all statements herein and release the camp and all others from liability in connection with the same. I understand that, if employed, I will be an at-will employee and that any agreement to the contrary must be in writing and signed by the director of the camp. I also understand that untrue, misleading or omitted information herein may result in dismissal, regardless of the time of discovery by the camp. All statements become part of any future employee personnel files.

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

Office use only: Interview Date \_\_\_\_\_ Pos. \_\_\_\_\_ Amt. \_\_\_\_\_

Interview Answers: