

Camp Winnamocka, Inc
 #68 Fort Jackson Road
 Arkadelphia, AR 71923

Ph (870)246-4599 Fax (870)246-6345 email: camp@winnamocka.com

Name _____ SSN _____
 Permanent Address _____ Phone _____
 School Address _____ Phone _____
 E-mail address _____ Cell Phone _____
 Date of Birth _____

What type of position do you want at camp? _____
 (Kitchen, Van Driver, Maintenance, etc.)

Are there any reasons you may have difficulty performing any of the essential elements of the job for which you are applying? _____ If so, please explain

Education

Years	School	Major Subjects	Degree Granted

Past Employment (Provide a full record of all employment and explain any gaps in employment. Use a separate sheet if necessary.)

Dates Employer Address & Phone Nature of Work Supervisor Reason for Leaving

Is there anyone we should not contact ? Why?

Days/hours available to work:

No pref _____ Thur _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____

Do you have a valid driver's license? _____ State _____

Have you ever been convicted of a crime? _____ No _____ Yes

If yes, explain the number of convictions, how recent the offense was, and sentencing imposed.

Write a brief biographical sketch, including specialized training, and experience or training in other fields which might have a bearing on the position(s) for which you are applying.

Are you available for an interview? _____ If so when/where? _____

Additional Comments

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 or in other documents completed by the applicant will result in dismissal, regardless of the time of discovery by the camp.

Signature _____ Date _____