



Girl Scouts of Eastern Oklahoma
 2432 E. 51ST Street, Tulsa OK 74105
 Tel: (918) 749-2551 Fax: (918) 749-2556
 www.GirlScoutsEastOK.org



Member Agency



RESIDENT CAMP STAFF APPLICATION
 APPLICANT STATUS: New Applicant Re-employment

PERSONAL INFORMATION

First Name _____ Middle Init. _____ Last Name _____ E-mail Address _____

Present Address _____ City _____ State _____ Zip _____ (Area Code) Mobile Phone # _____

Permanent Address _____ City _____ State _____ Zip _____ (Area Code) Other Phone # _____

Present Occupation/Year in School _____ Dates available: From _____ To _____

I learned about this job through: Job Fair at _____ Newspaper Ad in _____ C.I.T. Program
 Referred by: _____ Other: _____

As of June 1, I can offer proof that I am at least: 14 yrs. old 16 yrs. old 17 yrs. old 18 yrs. old 21 yrs. old

Have you ever been convicted of a crime, other than traffic violations? NO YES If yes, please state offense, date, and location. _____

POSITION DESIRED

- | | | |
|---|--|--|
| <p><u>Applicants must be at least 14</u></p> <p><input type="checkbox"/> Kitchen Staff/Dish Room Attendant</p> <p><u>Applicants must be at least 16</u></p> <p><input type="checkbox"/> Kitchen Staff/Food Service Assistant
 <input type="checkbox"/> Maintenance Staff/Ranger's Assistant</p> | <p><u>Applicants must be at least 17</u></p> <p><input type="checkbox"/> Counselor/Unit Staff</p> <p><u>Applicants must be at least 18</u></p> <p><input type="checkbox"/> Activities Program Director
 <input type="checkbox"/> Camp Administrative Assistant
 <input type="checkbox"/> Kitchen Staff/Head Cook
 <input type="checkbox"/> Waterfront Staff/Lifeguards
 <input type="checkbox"/> Wrangler/Equestrian Staff</p> | <p><u>Applicants must be at least 21</u></p> <p><input type="checkbox"/> Business Operations Director
 <input type="checkbox"/> C.I.T. Program Director
 <input type="checkbox"/> Food Services Director
 <input type="checkbox"/> Head Counselor/Unit Leader
 <input type="checkbox"/> Health & Safety Director/RN
 <input type="checkbox"/> Horseback Riding Program Director
 <input type="checkbox"/> Leadership Program Director
 <input type="checkbox"/> Waterfront Program Director</p> |
|---|--|--|

EDUCATION

Name of School (High School, College, etc.) _____ City/State _____ Year(s) Attended _____ Highest Grade or Degree Completed _____

TRAINING, CERTIFICATIONS, AND SKILLS

Indicate areas in which you have: **1: Interest** **2: Experience** **3: Training/could teach**

Hiking	1 2 3 _____	Horseback Riding	1 2 3 _____
Outdoor Camping	1 2 3 _____	Challenge Course	1 2 3 _____
Nature Study/Ecology	1 2 3 _____	Caving/Climbing	1 2 3 _____
Theatre	1 2 3 _____	Canoeing/Kayaking	1 2 3 _____
Dance	1 2 3 _____	Sailing	1 2 3 _____
Pottery/Clay	1 2 3 _____	Water Skiing	1 2 3 _____
Photography	1 2 3 _____	Motor Boat Driving	1 2 3 _____
Archery	1 2 3 _____	Other: _____	

Briefly summarize community, school, or other experiences that will enable you to carry out the responsibilities of the job you are seeking, including your experiences working with children. _____

CAMPING EXPERIENCE

What type(s) of camping experiences have you had?

Day Camp Resident Camp Primitive Camping Family Camping Other _____

Indicate the sponsoring organization/agency who offered the camping opportunity:

Girl Scouts Boy Scouts YMCA/YWCA 4-H Camp Fire Other _____

Describe your experience. (positive, negative, etc.)

AFFIRMATIVE ACTION STATEMENT

There shall be no discrimination on the basis of race, color, creed, gender, age, disability, national origin, citizenship, sexual orientation, or marital status. In addition, to ensure full equality of opportunity in all operations and activities of the organization, every staff member in Girl Scouts of Eastern Oklahoma shall be selected under fair employment procedures that provide equal employment opportunities to all people. There shall be special efforts in affirmative action in the recruitment, hiring, training, and promotion of qualified individuals who are American Indian or Alaskan Native, Asian, Black or African American, Hawaiian or Pacific Islander, White, Other, and also of Hispanic Origin. There shall also be special efforts to make reasonable accommodations for physical and mental limitations of employees and applicants consistent with performance of essential job functions and the effective operations of the business. **For EEO Reporting purposes only, please complete the following information: (optional)**

I am: Male Female

I classify my race/nationality as: (A) Asian or Pacific Islander (B) Black/African American (H) Hispanic
 (AI) American Indian or Alaskan (W) White/Caucasian (O) Other

EMPLOYMENT EXPERIENCE

Current or most recent employer: _____

Employer's address: _____

Supervisor: _____ Phone Number: _____

Position/Responsibilities: _____

Employment Dates (MO/YR): From: _____ To: _____

Reason for leaving: _____

Previous employer: _____

Employer's address: _____

Supervisor: _____ Phone Number: _____

Position/Responsibilities: _____

Employment Dates (MO/YR): From: _____ To: _____

Reason for leaving: _____

REFERENCES

List the names of three persons **not related to you** (such as former employers, teachers, coaches, etc...) who can judge your qualifications for the position you have applied for. If you have previous experience as a camp staff member, at least one reference should be from a camp director or other camp administrator.

Name Address City, State, Zip Phone # E-mail Address

VOLUNTARY DISCLOSURE

My signature below indicates the understanding that: a) I must submit proof of a physical examination within the past 12 mos. as a condition of employment; b) I will be subject to a pre-employment drug screening, and if hired, subject to random drug screening during the course of employment; c) I will be subject to a criminal background check prior to employment; d) If my personal beliefs conflict with camp traditions, policies, or general camp experiences, I will hold camp beliefs first while carrying out my duties; e) Falsification or significant omissions of any information will be cause for rejection of this application, or dismissal if discovered after employment. I certify that all information provided on this application is true and complete.

Applicant Signature

Date