

## EMPLOYMENT OR VOLUNTEER EXPERIENCE (BEGIN WITH THE MOST RECENT)

From	To	Employer	Phone ( )	City, State
Job Title		Duties		
Supv. Name				
Starting Salary (Optional)				
Final Salary (Optional)		Reason for Leaving		
From	To	Employer	Phone ( )	City, State
Job Title		Duties		
Supv. Name				
Starting Salary (Optional)				
Final Salary (Optional)		Reason for Leaving		

## PREVIOUS CAMP EXPERIENCE

Camp Name:	Dates Attended:
In what capacity? <input type="checkbox"/> Camper <input type="checkbox"/> Counselor	
What did you enjoy about camp?	
What did you dislike?	

## HOBBIES/INTERESTS

List hobbies and interests that you participate in regularly: (do not include clubs or memberships)
Do you speak a language other than English? <input type="checkbox"/> no <input type="checkbox"/> yes If yes, list language(s) and fluency

## CAMP SKILLS (Please mark with a "T" skills you can teach; mark with an "A" skills you can assist)

CAMP CRAFT	SPORTS	AQUATICS/OTHER	
_____ arts & crafts/nature	_____ basketball	_____ woodshop	_____ drama
_____ group/new games	_____ soccer	_____ jewelry making	_____ music
_____ song leader	_____ volleyball	_____ ceramics	_____ swim instructor
musical instruments played: _____	_____ softball	_____ dance/movement	_____ aerobics
_____	_____ recreational games & activities	_____ story telling	_____ outdoor cooking