NAME:_____

You must be at least 18 years of age---are you (You will be in a cabin living and supervising children directly at all times) Official school year classification completing by June 1-----(High School Graduate, College--Freshman, Sophomore, Junior, Senior, Graduate) What school do you attend? Is this an internship? Yes No How many credit hours if internship? Advisor name and email address: **Career goals:** What age group of kids do you think you would work best—please circle below (9-12) (12-14) (14-16)(16-18) Nutrition instruction experience? Yes No Level of education in dietetics: Any certifications? Please list: **Cooking experience?** Yes No Do you want kitchen experience? Do you already have kitchen experience? Aerobics group exercise experience? Yes No Any certifications? Please list: Strength Training experience? Yes No Personal Trainer certificate? Yes No Do you have training in CPR and First Aid? Yes No Have you been certified? Yes No List: Do you have CURRENT certifications? List: Do you have Aquatic experience? Yes No Will you be CURRENTLY certified as a lifeguard this summer? Yes No Will you be CURRENTLY certified in waterfront this summer? Yes No Will you be CURRENTLY certified in small boats this summer? Yes No Have you EVER been an American Red Cross certified lifeguard? Yes No ***Are you a strong swimmer willing to become a lifeguard? Yes No Do you have Arts & Crafts experience? Yes No **Explain:** Can you ride a bike? Yes No

NAME:_____

COMPUTERS

SOCIAL MEDIA

Can you fix	x bikes? Ye		ke? Yes No bikes in a circle	fun?	Yes No
Are you a "runne	er"? Yes I	No Explain	level—		
Do you have spor Explain wh	ts experience: at sports and				
Do you have Outo Please expl		on or Nature exp	oerience? Yes	No	
Do you have Arch Any certifi	nery experient cations? List:				
Do you have low Any certifi	-	oing wall experi	ence? Yes N	0	
Do you have self- Please expl		rtial arts experi	ience? Yes I	No	
Do you have any Please expl		e experience? EMS, nursing o			
Do you have any Please expl	e	psychology exp	erience? Yes	No	
I would like to he	lp with or lead	d these classes—	_		
Loss of Loved one	-	Adoption class	Family issues	s class	Anxiety class
Anger Management class		Book club	Relationship	Relationship class	
Social media etiquette		Fishing	Yoga		Tae Bo
Volleyball		Basketball	Soccer		Field Hockey
LaCrosseAnother sport or exercise class—list:					
Circle the items y	au would con	sidar vaursalf 4	he good et		
ORGANIZATION	CLEANING	LAWN CARE	PAINTING	РНОТОС	GRAPHY

***You will receive 6 days off in the summer arranged according to camp schedules and needs. Once schedules are made it will not be possible for employees to switch days off during the summer. Emergency/sick days off will be substituted with scheduled days off. If you run out of days then this may reduce your paycheck according to your employment agreement.

GARDENING

OFFICE WORK LOUD VOICE