

Camp Legacy



APPLICATION FOR EMPLOYMENT

Grounds Keeper/Maintenance

PERSONAL INFORMATION

DATE OF APPLICATION _____

Name: _____
Last First Middle

Address: _____
Street (apt) City, State Zip

Alternate Address: _____
Street (apt) City, State Zip

Contact Information: _____
Home Phone Cell Phone

Email: _____
(Please Print Clearly)

Will you be 18 years of age or older by May 1, 2017? _____
T-shirt Size (Circle One): S M L XL 2XL

Position Sought: _____ Available Start Date: _____

Desired Pay Range: _____

Are you currently employed? _____ If yes, may we contact your employer? _____

List current employer and contact information: _____

How did you learn about Camp Legacy? _____

EDUCATION BACKGROUND

Year in: High School (circle one): Freshman Sophomore Junior Senior
 College (circle one): Freshman Sophomore Junior Senior

High School: _____ Graduate? _____
School Name Dates

College: _____ Major _____

Other Education/Training: _____

SKILL EVALUATION

Please rate your skill level in each category.

	No experience	Little Experience	Experienced	Have Taught	Explain Skill Level
Tractor					
Large Mower					
Gator					
Power Tools					
Janitorial					
General Cleaning					
Lawn Equipment					
Grounds Keeping					
Plumbing					
Heating/Air					

List any other areas of special skill or expertise that may contribute to your abilities in performing the above mentioned skills.

PERSONAL EVALUATION

Please circle the appropriate number, where you see yourself in each of the following categories

	LOWEST								HIGHEST	
	1	2	3	4	5	6	7	8	9	10
TEACHABLE	1	2	3	4	5	6	7	8	9	10
PROMPTNESS	1	2	3	4	5	6	7	8	9	10
FOLLOWS DIRECTIONS	1	2	3	4	5	6	7	8	9	10
OUTGOING	1	2	3	4	5	6	7	8	9	10
GOOD WITH CHILDREN	1	2	3	4	5	6	7	8	9	10
TEMPER CONTROL	1	2	3	4	5	6	7	8	9	10
ENERGETIC	1	2	3	4	5	6	7	8	9	10
LEADERSHIP ABILITIES	1	2	3	4	5	6	7	8	9	10
SENSE OF HUMOR	1	2	3	4	5	6	7	8	9	10
GETS ALONG WITH OTHERS	1	2	3	4	5	6	7	8	9	10
FLEXABLE	1	2	3	4	5	6	7	8	9	10
TRUSTWORTHY	1	2	3	4	5	6	7	8	9	10
FULLFILLS OBLIGATIONS	1	2	3	4	5	6	7	8	9	10
LOVES THE OUTDOORS	1	2	3	4	5	6	7	8	9	10

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information that may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

Date

Signature