

St. Luke Summer Day Camp

910 Cross Gates Boulevard

Slidell, LA 70461

DUE MARCH 31

Application for Employment Counselors and C.I.T.'s

Please Place Photo Here

PLEASE TYPE OR PRINT

Name: _____

Age: _____ Date of Birth: ____ / ____ / ____

Address: _____

City: _____ Zip Code: _____

Home Phone: _____ Cell # _____

E-Mail Address: _____

Current Grade in School: _____

School Attending: _____

Date of Last Physical: _____ Any restrictions on activities? (list below)

Parent's Name: _____

Address & Phone if different from above: _____

If hired, will you be available for the entire length of camp (6 weeks)? ____ Yes ____ No

Can you swim? _____ Have you had instruction in lifesaving? _____

Are you a Red Cross Certified Life Guard? _____ (If yes, please attach a copy of your certification.)

IF YOU HAVE HAD INSTRUCTION IN THE FOLLOWING, PLEASE CHECK:

Swimming ____ Lifesaving ____ CPR ____ Gymnastics ____ Baton ____ Music ____

Cheerleading ____ Art ____ Drama ____ Baseball ____ Football ____ Soccer ____

Basketball ____ Dancing ____ Tennis ____ Aerobics ____ Karate ____ List any other:

List any school organizations you belong to: _____

Please list any employment you have had in the past. Include the name of the company, address, supervisor and phone number. _____

If you feel that there is any other information that we should consider regarding your application, please provide it on the following lines: _____

In 25 words or less, please describe yourself and tell why you would like to become a Counselor or Counselor In Training (C.I.T.): _____

List three references *NOT RELATED TO YOU*. Include their address *AND* telephone number.:

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the St. Luke Summer Day Camp Program (hereafter to be referred to as the Company).

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application and I authorize my former employer and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

I understand that filling out this form does not indicate that there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The Company retains the right to revise its policies or procedures, in whole or in part, at any time.

Signature of Applicant: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____
(If applicant is under 18 years of age.)

RETURN COMPLETED APPLICATIONS NO LATER THAN MARCH 31ST TO:

St. Luke Summer Camp
910 Cross Gates Boulevard
Slidell, LA 70461
Fax: 985-847-0742

S S S S S S S S Administrative Use Only. Do NOT Write Below This Line S S S S S S S S

