



Our Mission: " To provide a quality Christ-centered camping and retreat environment where all guests have the opportunity to meet with God in a fresh new way"

Date of Interview:	
____/____/____ <i>mm/dd/yy</i>	Time: _____ <i>(Office Use Only)</i>

Date of Application: _____

APPLICATION FOR EMPLOYMENT

Personal Information *(please print)*

First name:		Middle Name:	Last Name:	
Address:		City:	State:	Zip:
Phone: () ()	Cell: () ()	Email:		
What position would you like on camp?		Hours per week:	Desired Wage:	
Do you meet/exceed min. age requirmentst for requested position? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure				
Available start date ____/____/____ to ____/____/____				

Availability Schedule: *Please check all dates you are available to work*

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Do you know dates of any large events (vacations, reunions etc.) you will need off during the summer? For scheduling purposes, please list below those you know of.

Can you perform the essential, functions of the job for which you have applied, with or without reasonable accomodation? (If not, please describe below) Yes No

Work History: *(please print)*

Dates	Employer/Supervisor	Phone	Reason for leaving

Education: *High School and Beyond (please print)*

Dates	School	Major Subjects	Degree Granted

References: Give names of three persons [Not Relatives] having knowledge of your character, experience, work habits and ability.

Name	Relation	Phone/Email
Name	Relation	Phone/Email
Name	Relation	Phone/Email

Skills & Certifications

Please list any skills and/or certifications you possess that you feel would be an asset to LGCC and would help you in your job if you are hired (eg. technical, sports, electrical work, certified life guard or climbing instructor, CPR certified)

Harrassment

The camp's policy is to prohibit all forms of harassment by our employees. This includes sexual, racial, religious, and other forms of harassment. Have you ever been accused of harassment of any person including, but not limited to, workplace harassment? (Note: a prior accusation and when it occurred will be evaluated by the camp before any decision is made) Yes * Please explain No

--

I authorize investigation of all statements herein, including any checks of criminal records, and release the camp and all others from liability in connection with same. I understand that, if employed, I will be an at-will employee unless there is an agreement or law which alters that status. Furthermore, I understand that any agreement must be in writing and signed by the designated camp official. I also understand that untrue, misleading, or omitted information herein or in other documents completed by the applicant may result in dismissal, regardless of the time of discovery by the camp.

Signature _____ Date _____

605 Birch Avenue Alexandria, MN 56308
 Phone: 320.763.3680
 Email: info@lakegenevacamp.com