



# Camp Choconut

Summer address: PO Box 10 - Friendsville, PA 18818 (570) 553-2995

Winter address: 1494 Rose Ave E., St. Paul, MN 55106 (651) 338-3042

www.campchoconut.com

fred.lorber@campchoconut.com

## EMPLOYMENT APPLICATION

Date \_\_\_\_\_

Indicate job preferences by putting a 1 (most desirable), 2, 3 (less preferable) or N/A (not applicable, or not a job for me) on the appropriate lines below.

\_\_\_ Counselor (17 years old or older) \*

\_\_\_ Cook

\_\_\_ Healthcare Staff (license or certificate) \_\_\_\_\_

\_\_\_ Other Staff Position (please be specific) \_\_\_\_\_

**For Counselors:** Length of Employment Desired: 5 Weeks \_\_\_\_\_ / 7 Weeks \_\_\_\_\_

(\*If you are interested in being a Counselor in Training (CIT) – 16 years old, call for more information.)

Name _____			Man _____	Woman _____	Other _____
<i>First</i>	<i>Middle</i>	<i>Last</i>			
Current Address (where you can be reached prior to camp) _____					
City, State, ZIP Code _____			Phone _____		
Permanent Address (where you can always be reached, e.g., parents') _____					
City, State, Zip _____			Phone: _____		
E-Mail Address _____					

Age (Please check one of the following): 25 or over \_\_\_\_\_ 21 or over \_\_\_\_\_ 17 or over \_\_\_\_\_

We believe our community is strengthened through its diversity. Therefore we encourage men and women of any age, ethnic background, religion, economic status or sexual orientation to apply.

Race (optional) [ ] African American [ ] Asian American [ ] Multi-Racial [ ] Caucasian [ ] Foreign citizen [ ] Latino/Latina Hispanic  
[ ] Native American [ ] Other \_\_\_\_\_ (We ask only to assist us in creating a multicultural community.)

How did you hear about Camp Choconut? \_\_\_\_\_

Formal Education \_\_\_\_\_

List your experiences working with kids (professional, internships, volunteering) in order by date starting with the most recent. Please include job title, dates and duties. Use a separate sheet if necessary and/or attach your resume:

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List certifications and expiration dates (Life Guard Training, WSI, CPR, WFR, WFA, etc.)

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Do you play a musical instrument? \_\_\_\_\_ If so, what? \_\_\_\_\_

If applying for 7 weeks, are you free of personal and professional commitments June 14<sup>th</sup> through August 6<sup>th</sup>?

Yes \_\_\_ No \_\_\_. If not, describe briefly \_\_\_\_\_

If applying for 5 weeks, are you free of personal and professional commitments June 14<sup>th</sup> through July 21<sup>st</sup>?

Yes \_\_\_ No \_\_\_. If not, describe briefly \_\_\_\_\_

Please describe any *special accommodations* Camp Choconut would need to make for you: \_\_\_\_\_

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**BRIEFLY ANSWER THE FOLLOWING QUESTIONS:**

1. What is the activity area in which you would most want to work with kids (e.g., woodworking, waterfront, camp craft, archery, canoeing, nature/environmental ed., sports, general)? What background or experience do you have in this area? \_\_\_\_\_

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2. In what other areas do you feel competent to work with children? What background or experience do you have in this area? What other camp-related skills do you feel you are competent to lead? \_\_\_\_\_

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3. What do you think you would bring to Camp Choconut besides the skills listed above? \_\_\_\_\_

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4. What might your best reference write about you? \_\_\_\_\_

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5. What will you find most difficult about working with children in a camp setting? \_\_\_\_\_

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**PERSONAL “STATEMENT” (REQUIRED):**

Okay, this is the part where you get to be creative.... We’d love to know more about who you are, what makes you tick, why you want to work at Camp Choconut and what contributions you could make to camp! Feel free to write, draw, record, photograph, carve, paint, etc., but please make sure that whatever you send will fit in a file folder...

**AND MAKE SURE WHAT YOU SEND WILL HELP US UNDERSTAND WHY WE SHOULD HIRE YOU TO WORK WITH CHILDREN!**

(Please note we will not always be able to return your personal statement to you. When you send it plan on this!)

**REFERENCES:**

**Please send available reference forms to people such as an employer, teacher or minister** who can tell us about your experience as a leader or working with children. List their names, addresses and phone numbers below. **Do not include immediate family members or close friends.** A reference from a person connected with Camp Choconut would be welcome.

Name	City/State	Phone #	E-mail	Relationship to you
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

***BEFORE SUBMITTING YOUR APPLICATION!:***

**We ask the following questions because we take our responsibility for children seriously. The existence of criminal convictions does not preclude you from being employed at Camp Choconut. Honesty is the best policy here.**

Have you ever had any criminal convictions? Please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please review the Camp Choconut policies and practices in the enclosed document. You must be able to support and comply with *all* of these policies.

\_\_\_\_\_ Date: \_\_\_\_\_  
(Applicants signature)

I have reviewed the Camp Choconut policies and practices: Yes \_\_\_ No \_\_\_

If you cannot comply with these policies, please explain. \_\_\_\_\_  
\_\_\_\_\_

Mail or email your application. If mailing, send application to the winter address through May 15<sup>th</sup>, after which time mail your application to the summer address.