



STAFF APPLICATION
SEACAMP ASSOCIATION, INC.
 1300 BIG PINE AVENUE
 BIG PINE KEY, FL 33043
 305-872-2331
info@seacamp.org
www.seacamp.org www.nhmi.org

Please type or print legibly in ink.

Please submit completed application with a current resume.

Personal Information

Name: _____ Date: _____

Current Mailing Address: _____ Current Phone: _____

_____ Email: _____

City State Zip Code

Marital Status: _____ # Children: _____ Must family accompany you _____ Social Security: _____

Available from: _____ To: _____ Date of Birth: _____

School is over (if applicable): _____ and begins on: _____ Age: _____

How did you hear about this job? _____ Gender: _____

Are you SCUBA certified? _____ Highest Certification: _____ # of logged Dives _____

What position(s) are you interested in? (See employment opportunity document) _____

Previous Camp Experience (Camper or Staff)

Camp Name	Director	Camper/Staff	City	State
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Do you have any impairments, physical or mental, which would interfere with your ability to perform the job for which you have applied? _____ If so, what? _____

Have you had any criminal conviction for child abuse or sex related crimes? _____ If yes, explain: _____

Have you been convicted of a felony? _____ If yes, explain: _____

Personal References

List at least 3 persons, NOT RELATED TO YOU OR LISTED AS PREVIOUS SUPERVISORS BELOW, who have a definite knowledge of your qualifications for the position(s) for which you are applying. Enter the names of former employers, teachers, and/ or co-workers. If additional space is required, please list on a separate sheet of paper and attached to this application.

1. Name: _____ Position: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

2. Name: _____ Position: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

3. Name: _____ Position: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

EMPLOYMENT HISTORY AND VERIFICATION

Company Name: _____ Employment Supervisor*: _____

Address: _____

Street City State Zip

Employer Email: _____ Phone #: _____ Fax #: _____

Employment Dates: From: _____ To: _____ Position: _____

Nature of work: _____

In this position, did you perform safety sensitive duties that require a DOT or USCG drug and alcohol testing: _____

I authorize the above named employer to furnish you with the information requested.

Applicant's Signature: _____ Applicant (Print) _____

Company Name: _____ Employment Supervisor*: _____

Address: _____

Street City State Zip

Employer Email: _____ Phone #: _____ Fax #: _____

Employment Dates: From: _____ To: _____ Position: _____

Nature of work: _____

In this position, did you perform safety sensitive duties that require a DOT or USCG drug and alcohol testing: _____

I authorize the above named employer to furnish you with the information requested.

Applicant's Signature: _____ Applicant (Print) _____

Company Name: _____ Employment Supervisor*: _____

Address: _____

Street City State Zip

Employer Email*: _____ Phone #: _____ Fax #: _____

Employment Dates: From: _____ To: _____ Position: _____

Nature of work: _____

In this position, did you perform safety sensitive duties that require a DOT or USCG drug and alcohol testing: _____

I authorize the above named employer to furnish you with the information requested.

Applicant's Signature: _____ Applicant (Print) _____

Please answer the following questions to help us get to know you better.

(Use additional pages if necessary)

1. Briefly explain why you are interested in working in environmental education and camp.

2. Describe your previous experiences teaching and working with young people.

3. What do you consider your main qualifications for the position for which you are applying?

4. What contributions do you think you can make at camp?

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application packet for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application packet or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of SEACAMP ASSOCIATION, INC.

Signature of Applicant _____ Date _____

All statements become part of any future employee personnel files. Seacamp Association, Inc. is an equal opportunity employer.