



ST. CHARLES PARISH PARKS AND RECREATION

274 JUDGE EDWARD DUFRESNE PARKWAY LULING, LA 70070 PH: 985-783-5090

SUMMER CAMP EMPLOYMENT APPLICATION

DEADLINE TO HAVE APPLICATION SUBMITTED IS 4:00PM MARCH 29. NO EXCEPTIONS

PLEASE PRINT LEGIBLY

PERSONAL INFORMATION

First Name: _____

Last Name: _____

Date of Birth: (MM/DD/YYYY) _____ (MUST BE AT LEAST 16 YEARS OF AGE)

Mailing Address: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

E-mail Address: _____

Home Phone: _____ Cell Phone: _____

Activity Restrictions

POSITION INFORMATION

Please circle which camp(s) you would prefer to work at (this does not guarantee you that location):

Lakewood Elementary

Albert Cammon (St. Rose)

Luling Elementary

Ethel Schoeffner (Destrehan)

Which position are you interested in? Please circle one

Site Coordinator

Camp Supervisor

Senior Counselor

Junior Counselor (16 yrs and up)

SKILLS

Please circle all activities which you have taught or for which you have had training.

Aerobics

Basketball

Dancing

Gymnastics

Swimming

Art

Cheerleading

Drama

Music

Tennis

Baseball

CPR

Football

Soccer

List Certifications: _____



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EDUCATION

Please provide us with your education history.

<u>LEVEL</u>	<u>NAME OF SCHOOL</u>	<u>CITY/STATE</u>	<u>DEGREE/MAJOR</u>	<u>GRADUATION YEAR</u>
HIGH SCHOOL				
COLLEGE				
OTHER				

List any awards or achievements that you have received.

List and briefly describe and school/community organizations to which you belong.

WORK EXPERIENCE

Please provide us with the history of your previous job(s) if any.

Employer 1 _____ Phone Number _____

Type of Business _____ Job Title _____

Supervisor's Name _____ May We Contact this Employer? Yes No

If no, why not?



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Duties

Employer 2 _____ Phone Number _____

Type of Business _____ Job Title _____

Supervisor's Name _____ May We Contact this Employer? Yes No

If no, why not?

Duties

If you are a former employee, please list the year(s) of employment and camp where you worked below or any other camp experience.

CAMP EXPERIENCE

<u>DATES</u>	<u>CAMP</u>	<u>DIRECTOR/COORDINATOR</u>	<u>JOB TITLE</u>



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REFERENCES/PERSONAL REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references. For personal references, please list individuals who do know you and your character. Do **not** include relatives.

<u>NAME</u>	<u>OCCUPATION</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>	<u>NUMBER OF YEARS KNOWN</u>

BACKGROUND INFORMATION-CRIMINAL RECORD

Please complete this section completely.

Have you ever been convicted of a crime? Circle one. Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Have you ever been convicted of a sexual abuse crime? Circle one. Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.



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WORK AVAILABILITY

If hired, will you be available to work for the entire length of camp? Circle one. Yes No

If no, what dates are you unavailable? _____

CAMP IS A 6 WEEK MANDATORY COMMITMENT BEGINNING JUNE 3 AND ENDING JULY 12. PLEASE SCHEDULE VACATIONS AND OTHER ACTIVITIES BEFORE OR AFTER SUMMER CAMP.

Mandatory orientation will take place on May 22 and May 29. If selected for employment, you will be required to attend one of these orientations.

MANDATORY APPAREL

If accepted for employment, it is **mandatory** that all summer camp employees purchase staff camp shirts to be worn every day.

Mandatory T-Shirts for all summer camp employees are \$10.00 each and will be offered at employee orientation.

What is your t-shirt size? Adult Small _____ Adult Medium _____ Adult Large _____ Adult Extra Large _____ Adult
XX Large _____ Adult XXX Large _____

Please provide any other information that you feel we should consider regarding your application. This can include a letter of recommendation from a teacher, administrator, or coach at the school you currently attend or have attended in the past. For adults, this can include a letter of recommendation from your current or previous employer.

Return all applications to the St. Charles Parks and Recreation Department. Applications can be e-mailed to Morgan Robicheaux at mrobicheaux@stcharlesgov.net

Application Certification

I certify that all the information on this application and any supporting documents is be completed to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of an information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

My signature constitutes acknowledgement that St. Charles Parish, to the extent permitted by federal, state, and local law, can test me for illegal or controlled substances, conduct inspections of property without notice, and communicate test results to St. Charles Parish Personnel Department, St. Charles Parish Parks and Recreation Directors, and myself.

If hired, I agree to conform to the rules and regulations of St. Charles Parish and I understand that St. Charles Parish has complete discretion to modify such rules and regulations at any time.

I agree to complete any required authorization forms if need be for a background investigation.



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Applicant's Signature _____

Applicant's Printed Name _____

Date _____

Parent/Legal Guardian Signature

If applicant is under 18 years old, please read and sign.

If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that St. Charles Parish, to the extent permitted by federal, state, and local law, can test the applicant for illegal or controlled substances, conduct inspections of property without notice, and communicate test results to St. Charles Parish Personnel Department, St. Charles Parish Parks and Recreation Directors, the applicant, and the applicant's legal guardian.

Parent/Legal Guardian's Signature _____

Parent/Legal Guardian's Printed Name _____

Date _____