



CAMP MOUNT LUTHER

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Employment Application for Returning Staff

Federal & state law prohibits discrimination in employment because of race, creed, age, sex, national origin, or disability

PERSONAL INFORMATION

NAME:	DATE:
HOME ADDRESS:	PHONE:
PRESENT ADDRESS:	PHONE:
E-MAIL:	HOME CONGREGATION:
EDUCATION (Circle current level or highest level completed) High School: 10 11 12 College: 1 2 3 4 Grad School: 1 2	DEGREES/MAJOR:
CERTIFICATIONS YOU HOLD:	

Have you ever been convicted of a felony or misdemeanor or pleaded no contest in a felony, other than a minor traffic violation? () YES () NO

If yes, explain when, where, and the nature of the felony and describe the outcome:

PAST WORK HISTORY

Please provide a full record for all employment- paid and volunteer- and explain any gaps in employment.

DATES	EMPLOYER/SUPERVISOR	ADDRESS AND PHONE	NATURE OF WORK

QUESTIONS

What position do you want at camp? (Can include first and second choice)

Why do you want to serve on the Mount Luther staff again?

What gifts you feel you have to offer to the camp this summer?

How would you like to use those gifts?

In what ways do you feel that you will show growth in your work at camp this summer?

How have you grown spiritually since last summer?

If you are asked to serve on staff next summer, what would you do differently than you did last summer?

What will be your number one priority if you are on staff next summer?

What else is new in your life that would contribute to your work this summer?

I have read and understand the job description for the position which I am applying. The information I have provided in this application is true and correct to the best of my knowledge. I give permission to Camp Mount Luther to contact former employers and references as needed. I understand that I am required to have an Act 151 Child Abuse History Clearance and a Pennsylvania State Police Criminal Background Check and completed voluntary disclosure form. I also understand that I may be asked to take a drug and alcohol screening test at any time during my employment. I understand that, if employed, I will be an at-will employee unless there is an agreement or law which alters that status.

Signature_____

Date_____