



Camp Washington Summer Staff Application 2016

Name: _____ **Date:** _____

Permanent Address (home): _____

School Address (if different from home): _____

At which address do you prefer to receive mail?:

Home Phone: _____ Cell Phone: _____ Email: _____

Preferred way to contact: Cell Email Home Phone Mail Home Mail School Other: _____

Social Security #: _____ Gender: _____ Date of Birth: _____ (Over 21 years)

Religious Affiliation: _____ Parish & Town, if Episcopal: _____

Are you a U.S. Citizen? Yes No If not, what type visa? _____
 Driver's License? Yes No Number & State: _____
 Military Service? Yes No Dates of Service: _____ Type of Discharge: _____

What position are you interested in?

Assistant Director . Staff Support Waterfront Director Program Staff -- Area: _____
Cabin Counselor Jr. Cabin Counselor Nurse Other: _____

Salary Desired: \$ _____ Dates Available: From _____ To _____
 (June-August)

☉ Shirt Size (for staff shirts):
Small _____
Med _____
Large _____
X-L _____
Other: _____

Education & Training

	Name	Location (full address)	Years attended	Major (Did you graduate?)
High School				
College/University				
Other Training				

Associations, clubs, sports, professional societies, awards etc.:

Camping History

Camp Name & Full Address:

Dates of attendance/employment:

Position:

Camper

Staff

Day Camp

Overnight Camp

References

Please list two references other than relatives or previous employers.

Name	Phone	Email	Address	Relationship

Are there any reasons why you may have difficulty in performing any of the essential elements of the position(s) for which you have applied? ***If YES, please explain in the space below.*** Yes No

Statement of Practice

In order to safeguard the well-being of the youth served, Camp Washington, Inc. will investigate the accuracy of the data provided in the application process for all applicants before appointment to the camp staff can be made. This investigation will include, but is not limited to, reference checks with past employers, personal references provided, the military, educational institutions, volunteer organizations, civic groups and law-enforcement agencies.

Camp Washington, Inc. will conduct the following database searches for all applicants considered for employment, independent contractors & volunteers:

- * Social Security Number Trace
- * County court record search for all counties associated with your Social Security Number
- * The National Criminal Database
- * Sex Offender Registries

Your consent to conduct the above database searches is required in order to be considered for employment, contracted services or acceptance as a volunteer at Camp Washington, Inc. If you refuse to consent your application will not be considered. Applicants under the age of 18 must have their parents consent in order for Camp Washington, Inc. to conduct a background check.

A ~~Driving History~~ may be requested of individual staff for the purpose of designating persons authorized to transport campers. You do not need to consent to the ~~Driving History~~ as a condition of employment, contracted services or acceptance as a volunteer.

**CAMP WASHINGTON WILL NOT REQUEST A
CREDIT REPORT
ON ANY SEASONAL EMPLOYEE, INDEPENDENT
CONTRACTOR OR VOLUNTEER**

By signing this document I,

- o give the Director of Camp Washington, Inc. permission to check my personal references and previous job/volunteer experience listed above and on any other previous applications.
- o give the Director of Camp Washington, Inc. permission to ask prior employers/volunteer supervisors listed above and on any other previous applications about my job performance and evaluations.

I certify that the answers given in this application are true and complete to the best of my knowledge. I authorize investigation of all statements herein 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 and that any agreement to the contrary must be in writing and signed by the Director or designee. I also understand that untrue, misleading, or omitted information herein may result in dismissal regardless of the time of discovery by the Camp. In signing this form, I acknowledge that Camp Washington reserves the right to conduct criminal records checks and ~~for cause~~ or random drug testing on me as an employee; and that Camp Washington, Inc. also reserves the right to terminate my employment pending the outcome of drug testing and/or the criminal record check, during the entire duration of signed employment agreement.

CONSUMER/APPLICANT SIGNATURE

DATE

PARENT/LEGAL GUARDIAN SIGNATURE

DATE

(Required if consumer/applicant is under 18 years of age)

DISCLOSURE AND AUTHORIZATION FOR EMPLOYER TO ACCESS CONSUMER REPORTS

Camp Washington

AUTHORIZATION

I hereby authorize, without reservation, the obtaining of %consumer reports+or %investigative consumer+reports by **Camp Washington** at any time after receipt of this authorization and throughout my employment or volunteer service, if applicable. I further authorize and request, without reservation, any present or former employer, school, police department, state or federal agency, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about me to furnish SecureSearch or **Camp Washington** with any and all background information in their possession regarding me, so that my employment qualifications may be evaluated and/or reassessed. I also agree that a fax or photocopy of this authorization with my signature should have the same authority as the original.

By signing below, I certify: (1) that I have read and fully understand this disclosure and authorization; (2) that all of the information I am providing is true, complete, correct and accurate; and (3) that I have received the attached Summary of Your Rights under the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.).

*The following is information required in order for **Camp Washington** to obtain a complete consumer report:*

FULL LEGAL NAME (First, Full Middle Name, Last Name)	
SOCIAL SECURITY NUMBER	DATE OF BIRTH*
STREET ADDRESS	
CITY, STATE, ZIP CODE	
DRIVER'S LICENSE NUMBER	ISSUING STATE
OTHER OR FORMER NAMES (AKA, Maiden Names, Married Names, Surnames, Etc.)	
_____ CONSUMER/APPLICANT SIGNATURE	_____ DATE
_____ PARENT/LEGAL GUARDIAN SIGNATURE <small>(required if consumer/applicant is under 18 years of age)</small>	_____ DATE
<p><i>By signing this form the Parent or Legal Guardian agrees and attests to the fact that the minor being screened has never plead guilty or been convicted of a juvenile or adult crime and that no cases are currently pending a court decision.</i></p>	

* This information will be used for background screening purposes only.

Please list all Counties and States you have lived in since the age of 18.

County	State	Name Used in County	Date From	Date To

DISCLOSURE

In connection with your application for employment or volunteer service with: **Camp Washington** (including any independent contract for services) or when deciding whether to modify or continue your ongoing employment or (if hired) or service, **Camp Washington** may obtain a consumer report+and/or an investigative consumer report+on you from **SecureSearch**, a consumer reporting agency, or from any third party, in strict compliance with both state and federal law. A consumer report is a communication of information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used for purposes of serving as a factor in establishing your current and/or continuing eligibility for employment purposes. An investigative consumer report is a report obtained through personal interviews with individuals who may have knowledge of your character, general reputation, personal characteristics, or mode of living. The consumer reports or investigative consumer reports may contain information regarding your credit history(if applicable to position), criminal records, driving history records, education records, previous employment history, social security traces, military records, professional licensure records, drug testing, government records, and other types of background information. You further understand that these reports may contain information concerning the reasons for termination of past employment. You are hereby notified that you have the right to make a timely request for the nature and scope of any investigative consumer report. You are further notified that, prior to being denied employment based in whole or in part on information obtained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the consumer reporting agency and a description in writing of your rights under the Fair Credit Reporting Act. Inquiries to **SecureSearch** should be directed to **SecureSearch; Consumer Disputes; 558 Castle Pines Pkwy. #B4-137, Castle Rock, CO 80108. 1 (866) 891 – 1954.**

MAINE AND NEW YORK APPLICANTS OR EMPLOYEES ONLY: You have the right to inspect and receive a copy of your investigate consumer report requested by Camp Washington by contacting the consumer reporting agency identified directly above.

NEW YORK APPLICANTS OR EMPLOYEES ONLY: By signing below, you acknowledge receipt of Article 23 A of the New York Correction Law.

MINNESOTA AND OKLAHOMA APPLICANTS OR EMPLOYEES ONLY: Please check this box if you would like to receive a copy of a consumer if one is obtained by the Company.

CALIFORNIA APPLICANTS OR EMPLOYEES ONLY: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW

Camp Washington (the %Company+) intends to obtain information about you for employment purposes from an investigative consumer reporting agency or consumer credit reporting agency. Thus, you can expect to be the subject of %investigative consumer reports+and %consumer credit reports+obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency (%ICRA+), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be **SecureSearch; Consumer Disputes; 558 Castle Pines Pkwy. #B4-137, Castle Rock, CO 80108. (866) 891 – 1954.**

The source of any credit report will be **SecureSearch or ClearStar Logistics; Consumer Disputes; 558 Castle Pines Pkwy. #B4-137, Castle Rock, CO 80108. (866) 891 – 1954.**

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law. Under California Civil Code section 1786.22, you are entitled to find out from an ICRA what is in the ICRA file on you with proper identification, as follows: In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file. A summary of all information contained in the ICRA file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.

By requesting a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

Proper Identification+ includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

The following are my responses to questions about my criminal record history (if any) with descriptions to any question with a YES answer:

CONSUMER/APPLICANT'S NAME: _____

1. Have you ever been convicted or plead guilty before a court of any federal, state, or municipal criminal offense? (Excluding minor traffic violations) Yes No

If Yes, please explain:

2. Have you ever received deferred adjudication or similar disposition for any federal, state or municipal criminal offense?

Yes No If Yes, please explain:

3. Have you ever received probation or community supervision for any federal, state or municipal criminal offense?

Yes No If Yes, please explain:

4. Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States?

Yes No If Yes, please explain:

5. As of the date of this authorization, do you have any pending criminal charges against you?

Yes No If Yes, please explain:

6. Have you ever served in the US Military? Yes No

7. If you answered YES to the above question, did you receive a DD214?

Yes No If Yes, can you present the document?: Yes No

8. If you answered YES to the above question 6, did you receive an honorable discharge?

Yes No If No, please explain:

CONSUMER/APPLICANT SIGNATURE

DATE

PARENT/LEGAL GUARDIAN SIGNATURE

DATE

(Required if consumer/applicant is under 18 years of age)