CAMP ALBRECHT ACRES EMPLOYMENT APPLICATION

PLEASE PRINT OR TYPE

APPLICANT: _____ LAST 4 SSN# _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ Will Accept Texts? ☐ YES ☐ NO

EMAIL: _____

Have you ever worked at Camp Albrecht Acres before? ☐ YES ☐ NO
If yes, please explain your prior role at Camp and the year or dates of employment:

_____

Have you ever worked at another summer camp other than Camp Albrecht Acres?
☐ YES ☐ NO If yes, please explain:

_____

Which department(s) at Camp Albrecht Acres are you interested in applying to? (check all that apply)

☐ Arts / Crafts / Music	☐ Kitchen	☐ Groundskeeping
☐ Outdoor Activities	☐ Lifeguard	☐ Housekeeping
☐ Camp Counselor	☐ Nursing	☐ Building Maintenance

What experience or credentials do you have in the department(s) you selected above?

_____

_____

If you have a college degree or other professional certifications, please list here:

_____

Generally, staff training begins each year in early June, and Camp runs through the first or second week in August. Shifts being as early as at 6:30am and can go into the night. Please list your availability to work:

DATES AVAILABLE: From: _____ To: _____

TIMEFRAME AVAILABLE (check all that apply)

☐ Mornings ☐ Afternoons ☐ Early Evening ☐ Overnight ☐ I'm flexible

I'M LOOKING FOR: ☐ Full-time (40 hours) ☐ Part-time / Number of hours _____

My ideal daily work hours would be (list start/end time): _____

My ideal days of the week to work would be: _____

I cannot work the following days or timeframes: _____

Comments regarding availability: _____

_____

HARASSMENT: Have you ever been convicted of any form of harassment (for example, sexual, racial, religious, or any other form? ☐ YES ☐ NO

If yes, please explain: _____

CRIMINAL RECORD: Have you ever been convicted of a crime, other than a minor traffic offense? ☐ YES ☐ NO

If yes, please explain: _____

Why are you interested in working with people (primarily adults) with special needs?

_____

_____

I authorize investigation of all statements herein, including any checks of criminal records, and I release Camp Albrecht Acres of the Midwest ("CAA") and all others from all liability in connection with same. I understand that, if employed, I will be an at-will employee unless there is an agreement or law which alters that status. Furthermore, I understand that any agreement must be in writing and signed by the designated CAA official. I also understand that false, misleading or omitted information herein, or in any other documents completed by the applicant, may result in dismissal, regardless of the time of discovery by CAA. All documentation becomes property of CAA.

Applicant Signature: _____

Date: _____

To submit your application, please save the completed document as a PDF and email it as an attachment to office@albrechtacres.org OR print and mail completed application to Camp Albrecht Acres, PO Box 50, Sherrill, Iowa 52073.