

*Camp Allegheny*  
 100 Camp Allegheny Drive  
 Stoystown PA 15563

*Mr. Dennis Tawney, Executive Director*  
 Phone: 814-754-5122 or 814-754-4336  
 Fax: 814-754-1020

**APPLICATION FOR EMPLOYMENT**

**I. GENERAL INFORMATION**

1. Name: (last) (first) (middle)			2. Date:		
3. Present Address (number & street) (city) (state) (zip)			4. Telephone ( )		
5. Permanent Address (number & street) (city) (state) (zip)			6. Telephone ( )		
7. Email Address					
8. Social Security Number			9. Position for which applying?		
10. Are you available to work		full time	part time/summer	weekend	
11. Who referred you to us?			12. Have you ever been convicted of a felony? Yes No If yes, please explain.		
13. Have you ever worked for this organization before? Yes No			14. May we check your references? Yes No		
15. Are you legally eligible for employment in the United States? Yes No If hired, you are required to submit proof of it.					
16. What special qualifications do you have?					
17. Can you perform the job duties of the position for which you are applying? (Please refer to the job description and personnel policy enclosed) Yes No If no, please explain:					
18. Do you meet the minimum age requirements for the position to which you are applying? (Please refer to job description) Yes No If no, please explain:					

**II. MINORS** *This section to be completed ONLY if under age 18:*

Age if under 18:		Birth Date if under 18, (Mo/Day/Yr.)			
Time dismissed from school:		Do you have permission from your parents to work? Yes No			
Do you have school district working papers from a previous employer?		Yes	No		
Can you work school nights?		Yes	No	Weekends? Yes No	
School activities that would conflict with work hours?					

**III. EDUCATION**

High School (name, location, & date graduated)
College (name, location & degree program)
Other schools or training (name & location, dates & certificates)

**IV. PREVIOUS EXPERIENCE:** (Please list most recent position first)

Name and address of employer/s:	Dates: From - To:	List your duties:	Reason for leaving:

V. REFERENCES: (List three people who have observed you as a leader, or under whose supervision you have worked, one of the three must be from your pastor. *Also you will need to provide 3 letters of reference, one from each person listed below.*

Name, address, telephone number/s and years known. 1.
2.
3.

VI. EMERGENCY INFORMATION ( Person to be notified in the event of an emergency)

First Name	Middle Initial	Last Name
address (number & street)	City	State Zip Telephone number ( )

VII. COMMENTS (Use to include other information you deem important and for continuation of any above item for which there was insufficient space.


VIII. CERTIFICATION

I hereby acknowledge and agree that my employment by Camp Allegheny will constitute an “employment-at-will.” This means that my employer and I will each have the right to terminate the employment at any time for any reason. I understand that I am expected to give two weeks notice. I understand that if this application is accepted, my employer will be Camp Allegheny Incorporated in Pennsylvania, a not-for-profit corporation through which the Camp Allegheny business is conducted.

I have read all information contained on this Application for Employment form. The information contained thereon as well as any and all information on any resume(s) I have submitted, is true and correct to the best of my knowledge. I have not failed or omitted to include in this information any fact(s) which I have reason to believe would be considered material to the application. I understand that my misrepresentation of or failure to disclose a material fact will be grounds for immediate termination with out severance pay.

**The responsibilities of the Camp Staff are serious and exacting in maintaining a Camping Program of such activities and services as contribute to the Camper’s physical, social, mental, and spiritual growth. My signature on this application indicates my sympathy with the purpose of our Camps: My willingness and ability to adjust to camp resources, conditions, and program.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**UNITED METHODIST CHURCH-WESTERN PENNSYLVANIA CONFERENCE**

Revised 1/05