

Rye Brook Travel Camp Counselor Application

Employment Application: (You must be available to work all 6 weeks) 7/5/21-8/13/21

<u>Please fax to 937-7438 or email to jkunicki@ryebrook.org</u> <u>Attn: Janice Kunicki</u>

First Name:	Last Name: _		
Home Phone Number:	Cel	11 #:	
Email Address			
Date of Birth:		Sex: Male	Female
Street Address			
City:			Code:
School Name and Address	(if applicable)		
Have you ever been convic	ted of a sex related child	d abuse or drug related	crime?
Have you ever been convic	ted of a crime more seri	ious than a traffic viola	tion?
Have you ever been employ	ed at another camp? Y	'es No	
If so, where?			
Position applied for:			
Present occupation or grade	»:		
High School attended:			Dates:
College(s) attended:			Dates:
			Dates:

Major:	Degree:
	please list the College you're attending next year:
	Freshman Orientation Date:
	hool teachers, employers or babysitting positions:
Zist iive (e) references: professionals, se	moor teachers, emproyers or eacy straing positions.
Name of Reference:	Phone:
Address of Reference:	
Name of Reference:	Phone:
Address of Reference:	
Name of Reference:	Phone:
Address of Reference:	
Name of Reference:	Phone:
Address of Reference:	
Name of Reference:	Phone:
Address of Reference:	
In your opinion, what are the characterist	ics of a good counselor?
How did you hear about Rye Brook Trave	el Camp?
Have you ever worked with children before	ore? Yes No
List (3) areas you feel qualified working	with campers:
Explain your swimming background:	

Do you currently hold a certified LGT or WSI card?	Yes	No
If you do not have LGT or WSI, would you be willing to	obtain either? Yes	No
Are you currently certified in RTE, First-Aid, or CPR?	Yes N	No
Would you be interested in obtaining any of the above cer	tifications? Yes _	No