

S.T.A.R. Camp

Staff Application



S.T.A.R Camp is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative. Questions, please contact a camp director listed below.

Applicant General Information:

Name: _____ T-Shirt Size: _____

Email: _____

How did you hear about this position? _____

Full Address: _____
Address City State Zip

Cell Phone #: _____ Other Phone #: _____

Personal Information:

Are you 18 years of age or older? Yes No

Are you a U.S. citizen or approved to work in the United States? Yes No

Will you consent to a mandatory controlled substance test? Yes No

Do you have any condition which would require job accommodations? If Yes, Yes No
 please describe below:

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes No

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:

Education and Training:

Name	Location (City, St)	Year Graduated	Degree Earned
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High School: _____

College/University: _____

Vocational/Specialized Training: _____

Previous Employment:

Employer Name _____

Supervisor Name, Title, Phone: _____

Employer Phone and Email: _____

Employer Full Address: _____

Dates Employed: _____

Reason for Leaving _____

S.T.A.R. Camp

Staff Application



Employer Name

Supervisor Name, Title, Phone: _____

Employer Phone and Email: _____

Employer Full Address: _____

Dates Employed: _____

Reason for Leaving _____

Employer Name

Supervisor Name, Title, Phone: _____

Employer Phone and Email: _____

Employer Full Address: _____

Dates Employed: _____

Reason for Leaving _____

References:

List three references we can contact who have knowledge of your character, experience or abilities.

Full Name/Occupation	Email Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional Information:

Why would you like to work at STAR Camp?

At Will Employment:

The relationship between you and the S.T.A.R Camp is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or S.T.A.R Camp. No representative of S.T.A.R Camp has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and our Camp Director.

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.

Applicant Signature Date

Send completed information to: S.T.A.R. Camp, P.O. Box 41066 Brecksville, OH 44141
Or email to: starsummercamp2021@gmail.com