

CAMP NURSE APPLICATION

MONDAMIN / GREEN COVE

COMPLETE this form, and return to:

Camps Mondamin/Green Cove
 P.O. Box 8
 Tuxedo, NC 28784
 800 688-5789

Date: _____

Name _____ Social Security Number _____

Address: _____ City _____ St _____ Zip _____

Home Telephone: _____ Best time to reach you? _____ Email address? _____

Best to reach you by [] Phone/answer machine [] Email [] Other _____

Do you Smoke? _____ Drink? _____ Use Drugs? _____

How did you learn of our camp? _____

Do you have any children who you would like to bring to camp? _____

EDUCATION:

<i>College</i>	<i>Major Subjects</i>	<i>Years</i>	<i>Degree: Earned</i>
_____	_____	_____	_____
_____	_____	_____	_____
Nursing	_____	_____	_____
_____	_____	_____	_____

WORK EXPERIENCE: (Be sure to include nursing experience)

<i>Dates</i>	<i>Name & Address of Employer</i>	<i>Telephone</i>	<i>Your Position</i>
From _____ To _____	_____	_____	_____
From _____ To _____	_____	_____	_____
From _____ To _____	_____	_____	_____

CHARACTER REFERENCES:

Please list three references, **two of which should be employers.** No relatives, please.

<i>Name</i>	<i>Address</i>	<i>Telephone</i>	<i>Relationship</i>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Any Camp Experience? _____ If So Where? _____

Do You Like Working With Children? _____

Do you have any impairments, physical or mental, which would interfere with your ability to perform the job for which you are applying? If so, what?

Write a brief biographical sketch, emphasizing nursing experience, work with children, and experience or training in other fields which might have a bearing on the position for which you are applying:

Use additional paper if needed...

Do you drive? _____ Valid Driver's license? _____ State? _____

Are there any specific conditions to your employment --(i.e. must have two months of employment, must have certain dates free, etc.?) _____

What salary do you expect? _____ (This is to save us both time in case we are not in each other's range).

What dates are you available? _____

LEGAL HISTORY:

Has your nursing license ever been suspended or revoked? _____

Has your driver's license ever been suspended or revoked? _____ Have you ever been convicted? _____

Have you ever been involved in an incident involving sexual or physical abuse of a child? _____ If yes to any of the last four questions, please explain: _____

Be sure to understand that the job entails long hours, little privacy, and many hours spent with children.
Your signature attests that you have answered the above questions honestly and accurately. You are under no obligation to accept a job by your signature, but falsification of the application is grounds for rejection or dismissal.

Date _____ Applicant's Signature _____