

APPLICATION FOR SEASONAL EMPLOYMENT



Section Break (Continuous)

(SUMMER SEASON)

221 Center

Street, Slippery Rock, PA 16057
 T 724-738-0058 † F 732-794-6685
 capnwp@shenango.org † www.capnwp.org

Directions: Thank you for applying! Please type or print in pen all requested information. Use additional sheets of paper if needed to contribute to your application. As soon as possible, mail (USPS) your application to CAPNWP at the address to the right. Once your application is received, you will be contacted and may be called for an interview. Thanks!

Section Break (Continuous)

Camping Association of the Presbyteries of Northwestern Pennsylvania, PC(USA)

A] General Information *Tell us who you are and the positions of interest to you.*

Name first _____ m.i. _____ last _____

Gender F M Age next July 1st _____

At which site(s) do you prefer to serve? *Check all you wish.*

Doesn't Matter Westminster Highlands Camp Lambec Main Office

For which position(s) are you applying? *First review the open positions, then prioritize your preferences.*

1] _____ 2] _____

3] _____ 4] _____

Are there any reasons you may have difficulty performing any of the essential functions? No Yes

Which employment dates are you available? Start Date month _____ date _____, year _____ to

End Date month _____ date _____, year _____

Special requests for days-off: _____

NOTE: Although staff are guaranteed at least 24 hours off each week, they are expected to be available every day until their weekly day-off is identified by their supervisor.

What are your wage or salary requirements? \$ _____ per hour day week month season

Are you legally eligible for employment in the USA? No Yes *Documentation required upon employment.*

Have you ever been convicted or accused of any harassment or abuse? No Yes

If yes, please explain: _____

B] Contact Information *Please let us know where you can be reached and how best to contact you.*

Permanent Home Address _____ Apt. _____ City _____

State _____ Zip _____ Landline Phone (____) _____

Temporary Mail Address (if different) _____ Apt. _____ City _____

State _____ Zip _____ Landline Phone (____) _____

Mobile Phone (____) _____ Email _____

Best way/s to contact me: Home Phone Mobile Phone Temporary Phone Email Mail

C] Written Responses *Please briefly and simply respond to the following.*

What unique contributions do you think YOU can make at a CAPNWP site and program?

Why do you want to serve and work at a CAPNWP site(s)?

What do you consider to be the central message(s) of the Christian Gospel? For you, what is essential for/about Christian faith?

CAPNWP Office	
App Rec'd	_____
Int Sch	_____
Intake Int	_____
Int #2	_____
Int #3	_____
Ref Rec'd	_____
1	_____
2	_____
3	_____
Ref & Wk His Ver	_____
—	_____
—	_____
—	_____
Skills Doc Rec'd	_____
Type _____	_____
Type _____	_____
Type _____	_____
Type _____	_____
App Notes	_____
Offer Sent	_____
Wage/Rate	_____
Position/s	_____
Employ Dates	_____
Unique Conditions	_____
Offer Notes	_____
Offer Ret'd & Acc'd	_____

How do these central message(s) and essentials impact your life and your future plans?