



# Employment Application Camp Harmony Inc.

Church of the Brethren  
Western Pennsylvania District of Pennsylvania  
P O Box 158, 1414 Plank Road  
Hooversville, Pa 15936-0158

(814) 798-5885 or (888) 745-2267

FAX: (814) 798-2225

<http://www.campharmony.org>

e-mail: [harmony@campharmony.org](mailto:harmony@campharmony.org)

Position Applying for: \_\_\_\_\_

## I. PERSONAL DATA

NAME: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ School/Temporary Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

\* Age: \_\_\_\_\_ sex: ( ) Male ( ) Female

\* Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*The age discrimination in employment act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 by less than 70 years of age

## II. EDUCATION

High School: \_\_\_\_\_

College : \_\_\_\_\_

Other: \_\_\_\_\_

(Name)

(Field of study)

(Highest grade completed)

## III. WORK EXPERIENCE

(start within the last recent and list all jobs held in the last 5 years)

A. \_\_\_\_\_

B. \_\_\_\_\_

C. \_\_\_\_\_

D. \_\_\_\_\_

E. \_\_\_\_\_

(Name of firm)

(Position held)

(Dates worked)

Should we feel it necessary, may we contact your present/previous employer for a routine investigation? ( ) yes ( ) no

*If additional space is necessary for a complete listing of your work experience or education, please attach a resume.*

**IV. Write a brief biographical sketch telling of special training, involvement in activities, interests or skills that would be useful in camping.**

**v. REFERENCES** (references should be individuals who know you personally, but are not related to you directly.)

A. \_\_\_\_\_  
B. \_\_\_\_\_  
C. \_\_\_\_\_  
D. \_\_\_\_\_

(Name) (Address) (Occupation)

Should we feel it necessary, may we contact the references listed in a routine investigation? ( ) yes ( ) no

**VI. PARENTAL CONSENT**

If the applicant is under the age of 18 at the time of application is completed, we must have the signature of a parent or legal guardian. This signature acknowledges that the parent/legal guardian is aware of their son/daughter's intent to apply for work at Camp Harmony. This signature also grants the camp staff authority, in the event of a health related emergency, to secure proper treatment should such occasion occur.

Date: \_\_\_/\_\_\_/\_\_\_ Signature: \_\_\_\_\_ Relationship: \_\_\_\_\_

**VII. SIGNATURE OF THE APPLICANT**

\_\_\_\_\_ date: \_\_\_/\_\_\_/\_\_\_

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This space for office use only: