



# Camp El-O-Win Employment Application

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Date Available \_\_\_\_\_

If hired, are you able to prove that you are authorized to work in the United States? \_\_\_Yes \_\_\_No

Have you ever worked for this company? YES NO  
  If yes, when? \_\_\_\_\_

## Education

High School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Did You Graduate? \_\_\_ Yes, in \_\_\_\_\_ \_\_\_ No \_\_\_ In Progress/Expected Graduation Year \_\_\_\_\_

College \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Did You Graduate? \_\_\_ Yes, in \_\_\_\_\_ \_\_\_ No \_\_\_ In Progress/Expected Graduation Year \_\_\_\_\_  
Degree Received: \_\_\_\_\_

Other \_\_\_\_\_ Address \_\_\_\_\_  
Did You Graduate? \_\_\_ Yes, in \_\_\_\_\_ \_\_\_ No Degree Received \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**References**

List three Professional References. **Include a letter of recommendation from at least one.**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Business/School \_\_\_\_\_ Email \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Business/School \_\_\_\_\_ Email \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Business/School \_\_\_\_\_ Email \_\_\_\_\_ Years Known \_\_\_\_\_

**Short Answer**

Please list your areas of highest proficiency, special skills, certifications or other “talents” which may contribute to your abilities in performing the position for which you are applying:

**Disclaimer and Signature**

“I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for a specific period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a conviction will not automatically result in disqualification from employment. I also understand that I may be rejected or terminated based on an unacceptable background check.”

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document upon hire.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this application to:**  
Camp El-O-Win Staff  
6533 N. Bungalow Lane

Fresno, CA 93704