

Application for Community Players' Camp Counselor

(Please email completed application to Matt Bogdan at oceancityhappyme@aol.com by April 15)

Name: _____

Email address: _____

Phone number: _____

Home address: _____

Date of birth: _____

Educational background

Work experience

A. Name of employer: _____

Address of employer: _____

Phone number of employer: _____

May we contact the employer for work reference? _____

B. Name of employer: _____

Address of employer: _____

Phone number of employer: _____

May we contact the employer for work reference? _____

Identify three personal references (persons not related to you and whom you have known for at least one year)

A. Name: _____

Email address: _____

Phone number: _____

B. Name: _____

Email address: _____

Phone number: _____

C. Name: _____
Email address: _____
Phone number: _____

Have you ever been convicted of any criminal activity? _____

Would you need any accommodations to help you perform the work? _____ If yes, what accommodations are needed?

Do you have any theater experience? _____ If yes, then explain your theater experience:

In one hundred words or less, explain why you would like to be a camp counselor.

