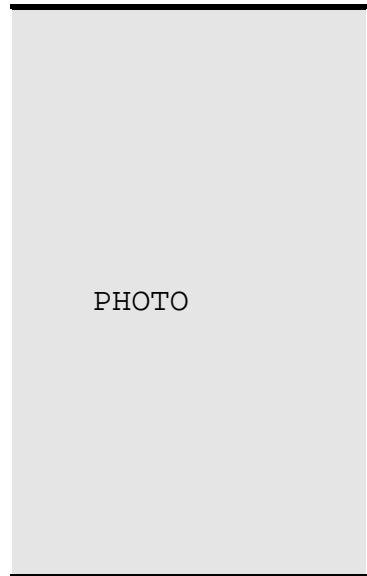


OFFICIAL STAFF APPLICATION OF RUACH DAY CAMP

Date _____ Position requested _____

PERSONAL

Last Name _____ First Name _____
 Home Address _____ City _____
 _____ State _____
 Zip Code _____ Phone() _____
 Cell Phone() _____
 E-Mail Address _____
Name of School _____
 School Address _____ City _____
 State _____ Zip Code _____
 Phone () _____
 Are you a citizen of the United States? _____
 Social Security Number _____
 Date of Birth _____ Month _____ Day _____ Year _____
 Age as of July 1 _____ Marital Status _____
 Are you licensed to drive a motor vehicle? Yes _____ No _____
 Children: age and sex _____
 Height (bare feet) _____ Weight _____
 Have you ever been convicted of a crime? _____
 Physical impairments (Explain) _____



EDUCATION

SECULAR

	Degree	Year	Entering Grade
_____ High School	_____	_____	_____
_____ College	_____	_____	_____
_____ Post College	_____	_____	_____

HEBREW

_____ Elementary School	_____	_____	_____
_____ High School	_____	_____	_____
_____ College	_____	_____	_____
_____ Post College	_____	_____	_____

PREVIOUS CAMP EMPLOYMENT (List last employment first)

Name of Camp	Position	Year	Salary	Director	Telephone
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

PROFESSIONAL TEACHING OR LEADERSHIP EXPERIENCE

Organization or School	Year	Position	Director	Telephone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

EXTRA-CURRICULAR INTERESTS: VARSITY, INTRAMURALS, CLUBS, CULTURAL, ETC.

In the following list, put letters "XX" before those activities you can organize and teach. Put a single "X" where you can assist

- | | |
|--------------------------|------------------------|
| _____ Sports | _____ Arts & Crafts |
| _____ Music (Instrument) | _____ Art |
| _____ Music (Singing) | _____ Dramatics |
| _____ Other | _____ Costuming |
| _____ Karate | _____ Stage Craft |
| _____ Yoga & Movement | _____ Dance |
| Water Sports | _____ Photography |
| _____ Swimming | _____ Ceramics |
| _____ Diving | _____ Chocolate Making |
| _____ Life Saving | _____ Computers |
| _____ Others | |

Please indicate first and second choices:

Circle age group of campers you prefer:

4-6 7-8 9-11

MISCELLANEOUS AND ADDITIONAL INFORMATION

Synagogue affiliation and name of Rabbi _____

Camps you have attended as a camper (camp) _____ (years) _____
(camp) _____ (years) _____

What could you contribute to our camp experience? _____

Any additional statements you wish to make pertinent to your application

NO APPLICATION WILL BE CONSIDERED UNTIL ALL 3 REFERENCES ARE RECEIVED

Signature _____

DO NOT WRITE BELOW THIS LINE

Interview:

Date _____ Interviewer(s) _____

Salary agreed upon _____ Hired _____ Rejected _____

Conditions _____

Comments _____