

Camp Host Volunteer Interest Form

Today's Date: _____

Name: _____
 Last, First, Middle

Address: _____

Email Address: _____ Phone # _____

Education (Name of School, City and State, # of years, Major Course/Certification)

SPECIAL SKILLS – List other formal training programs, which may be related to this position

EMPLOYMENT HISTORY

Job Title	Name of Employer	Phone Number
From:	Describe Primary Duties	Address
To:		Type of Business or Organization
Check one Full-time Part-time		Your Supervisor's Name & Job Title
<input type="checkbox"/> <input type="checkbox"/>		Reason for leaving

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<input type="checkbox"/> <input type="checkbox"/>		Reason for leaving

CERTIFICATE OF APPLICANT: I certify that all statements made in this interest form is true and complete to the best of my knowledge. I understand that any false statements, omissions of material facts, or willful misrepresentation will subject me to disqualification.

SIGNATURE: _____ DATE: _____