

**Employment Application
Tanglewood Summer Camp Counselors**

Name: _____

Date: _____

Birthdate: __/__/____

Local Address: _____

Email Address: _____

Cell Phone: _____ Home Phone: _____

Academic Year: FR SO JR SR Grad Other

Circle: High School College

Current Certifications: Please list **certifying organization** and **expiration date**.

_____ Cardio Pulmonary Resuscitation (CPR)

_____ First Aid

_____ Other (please specify)

Please list previous work and relevant volunteer experience:

Please list 3 references that we may contact (non-family member):

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

