



Summer Employment Application

Name:						
First		lle Initial	Last			
Permanent Address:	Phone:					
City:	Stat	e:	Zip:			
Temporary Address:	orary Address:			Valid until mm/dd/yyyy :		
Phone:	City:		State:	Zip:		
Cell Phone:	Email:					
Have you ever been employed	l by UNH, or an	y other USNH	campus? Yes	□ No		
Are you at least 18 years of ag	ge? 🗆 Yes 🏻	□ No If no,	date of birth?			
Position desired?		A	vailable from	to		
EDUCATION Post secondary Education School name & Address _			City/State:			
Course of Study						
Degree/Credits earned:		· · · · · · · · · · · · · · · · · · ·				
High School: School name & Address _						
Graduation Date:	n Date: Other:					
CAMP EXPERIEN	ICE AS CAM	IPER OR ST	AFF			
Dates Camp	Director	Address	Phone	Camper or Staff?		
1						
2						

The University of New Hampshire Cooperative Extension programs and policies are consistent with pertinent Federal and State laws and regulations on non-discrimination regarding race, color, religion, gender, age, national origin, sexual orientation, disability, veteran status, or marital status.

UNH, U.S. Dept. of Agriculture, and New Hampshire counties cooperating.

PAST EMPLOYMENT

List 3 most recent employers. Please include all requested information.

Dates	Employer	Address	Phone	Type of Work	Supervisor
1					
2					
3					
Please prov	RENCES ide the name/contact ter, experience or abi		e professionals, v	who are not related to yo	ou, who have knowledge
Nai		Relationshi		Contact Information	on (phone/email)
WATERFI	RONT			xpiration dates and spec Level of experience	
☐ Standard				RN LPN EN Other Level of	
☐ Shooting	R EDUCTATION g Sports (archery, saf Leadership Ot	e gun handling, etc. her Level of expe) NH Fish	h & Game Hunter Safety	and Certification
	RELATED rvice Maintena	nce Other			
	(for those over 21 as will only be allowed to		mises after provid	ing evidence of adequate i	nsurance.
				cense #:	
NH Defens	ive Driver Safety Cou	urse 🗆 Yes 🗆	No Expiration	on Date	
-	ailable to attend the	NH 4-H Shooting	Sports Training	g in Berlin, NH May 15	5-16, 2021?

of

UNH 4-H Camp Policies on Personal Behavior and Choices

- Children are to be treated with respect and dignity. Physical and/or emotional disregard or abuse will not be tolerated.
- Adults are treated with respect and dignity. Sexual, physical or emotional harassment will not be tolerated.
- Smoking is limited to designated smoking areas, and only during staff's time off.
- Alcohol is not permitted on camp property, and cannot be consumed while staff is on duty.
- Use of alcohol by minors under the age of 21 is illegal, and is not tolerated by UNH 4-H Camps.
- The use of non-prescription drugs, or the abuse of prescription drugs is not permitted at UNH 4-H Camps. Non-prescription drugs deemed to be medically necessary will be available through the camp infirmary.

Do you agree to abide by the camp rules listed above? □ Yes □ No
Have you ever been convicted of child abuse and/or neglect? ☐ Yes ☐ No
Have you ever been convicted of a criminal offense? ☐ Yes ☐ No
Other than the above, is there any fact or circumstance which would cause questions about having you supervise, guide, and care for young people? \Box Yes \Box No
Explain:
PLEASE ANSWER THE FOLLOWING QUESTIONS. Detail the experiences you have had supervising children and teens.
Working at camp can be an emotionally and physically demanding job. Are there any factors which would inhibit your ability to physically access all areas of camp, participate in camp activities, and/or be a supportive staff member to all campers and fellow staff?
List your hobbies and areas of special interest, and indicate those which you feel you could teach to others.
What will be your greatest contribution to UNH 4-H Camps?

UNH 4-H Camp has a commitment and responsibility to provide a safe and healthy environment for all youth. Applicants will be subject to a background check. Persons with a history of violent behavior, child abuse/neglect, or current drug/alcohol abuse need not apply.

I certify that the information supplied on this application is the truth. It is understood and agreed that any misrepresentation by me on this application, interview or accompanying resume will be sufficient cause for cancellation of the application process, as well as immediate dismissal if hired. Furthermore, I understand this position may be classified as "heavy duty", and a physical exam may be required to determine my ability to perform the requirements of the position. I authorize the University of New Hampshire to investigate all information provided, and to secure additional information as related to personnel decisions. I freely release from liability the University of New Hampshire, and its representatives, for seeking such information and all other persons, schools, corporations or organizations for furnishing such information. I have read and understand the above.

I have read and understand the above.						
Signature of applicant	Date					
FOR PERSONNEL DEPAR	RTMENT ONLY					
Arrange interview? ☐ Yes ☐ No	Interviewer:					
Remarks:						
References Checked: Yes No E	Зу:					
Contacted:	Date/time:					
Comments:						
	Date/time:					
Comments:						
Contacted:	Date/time:					
Comments:						
Offered Employment? Yes No	Accepted Employment? □ Yes □ No					
Dates of Employment:	_ to Salary:					
Job Title:	Camp:					

"Making life better in New Hampshire"

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To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (202)720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.