

62143 HWY 21  
ELLINGTON, MO 63638



Whole Kids Outreach

Phone: 573-663-3257  
Fax: 573-663-2933

**Camp Whole Kids**  
**Counselor Application for Employment Form**

Date:

Name: Last First Middle Social Security Number

Have you ever used any other names in the past? Yes No

If yes, please list all other names that you have used:

Present Address:

Address City State Zip Phone Number

Email: Emergency Contact: Name Phone Number

Preferred form of contact (check all that apply) Facebook Text Email Call

Are you currently eligible for employment in the U.S.?	Yes	No
Have you ever been employed by Whole Kids Outreach?	Yes	No
If yes, please give details:		
Position:	Counselor	Other:

Summer Day Camp: Check all the days you **can't** work

Orientation:	June 10th	June 11th	June 12th	June 13th	June 14th
Week 1:	June 17th	June 18th	June 19th	June 20th	June 21st
Week 2:	June 24th	June 25th	June 26th	June 27th	June 28th
Week 3:	July 08th	July 09th	July 10th	July 11th	July 12th
Week 4:	July 15th	July 16th	July 17th	July 18th	July 19th

**Experience:** Please start with your present or most recent employment. Include student teaching and/or other internships.

**Employer/Agency Name:**

**Type of Organization:**

Address

City

State

Zip

Position Held

**Name of Supervisor:**

**Date of Employment:**

**to**

**Phone Number:**

**Start**

**End**

**Description of Work Responsibilities:**

**Reason for Leaving:**

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**Employer/Agency Name:**

**Type of Organization:**

Address

City

State

Zip

Position Held

**Name of Supervisor:**

**Date of Employment:**

**to**

**Phone Number:**

**Start**

**End**

**Description of Work Responsibilities:**

**Reason for Leaving:**

**Please answer the following questions. Your application cannot be processed without this information.**

**1. Please write a brief introduction of yourself.**

**2. Why did you choose this kind of work?**

**3. How do you view your role as a WKO employee in the community?**

**4. As an employee, how would you contribute to the development of the wholesome camp environment?**

**5. What is your belief and/or idea of behavior management or discipline?**

**6. Describe your parent's methods of parenting and discipline.**

**7. What do you see as the role of a supervisor?**

**8. Briefly explain your personal philosophy of parenting (how do you believe it should be done).**

**9. List your experiences working with children.**

I grant Permission to Whole Kids Outreach, Inc. to investigate thoroughly and complete personal , education and work histories and to verify all information that may be given in connection with my seeking of employment. In addition, I release Whole Kids Outreach, Inc. from and all liabilities resulting from such investigation or verification. I understand and agree that I may be denied employment, or, if I am already employed, that my employment may be terminated based on information obtained during that investigation or verification. Upon the termination of my employment, regardless of when, how or why my employment is terminated, and whether such termination is effected by me or by the Employer, I authorize the release of reference information on all aspects of my employment history.

In addition, I understand and agree that this application will be considered valid for a period of one hundred eighty days (180). I recognize that, if I wish to be considered after that time, a new application for employment may be requested.

Moreover, I understand and agree that, if I am offered employment by Whole Kids Outreach, Inc., my employment will be based upon mutual agreement and that either I or Whole Kids Outreach, Inc. may terminate the employment relationship at any time and for any reason, except to the extent specifically provided in a written employment agreement entered into between myself and Whole Kids Outreach, Inc.

Finally, I certify that I have given true and accurate information and that I have read and agreed to the conditions of employment stated in this application and authorize the release as set forth above. If any information contained in this application is found to be false in the opinion of Whole Kids Outreach, Inc. in any respect, my application for employment may be rejected. Similarly, if I am already employed, I will be subject to discharge without notice at any time.

**By signing or typing my name below, I confirm that the above information is true and accurate.**

**Date**

**Signature**

**If under 18 years of age - Parent/Guardian Signature is required:**

**Date**

**Parent/Guardian Signature**

*Whole Kids Outreach, Inc. provides and promotes equal employment opportunities for all persons without regard to race, color, age, gender, national origin or citizenship, as provided by federal law.*

**DO NOT WRITE BELOW THIS LINE**

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**Application Received By**

**Date**

**Interviewed By**

**Date**

**Interviewed By**

**Date**

**Remarks**

**Hired?**

**Yes**

**No**

**Position**

**Start Date**

**Starting Salary**