



HLSA Employment Application 2025

Full Name: _____ Date: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Cell Phone:() _____ E-mail Address: _____

Dates Available:	Set-up and Training- June 16,17,18	<input type="checkbox"/>	Please indicate any dates that you may not be available:
	Session 1- June 23rd - June 27th	<input type="checkbox"/>	
	Session 2- June 30th - July 3rd (4 day week)	<input type="checkbox"/>	
	Session 3- July 7th - July 11th	<input type="checkbox"/>	
	Session 4- July 14th - July 18th	<input type="checkbox"/>	
	Session 5- July 21st - July 25th	<input type="checkbox"/>	
	Session 6- July 28th - August 1st	<input type="checkbox"/>	
	Session 7- August 4th – August 8th	<input type="checkbox"/>	
Camp Clean-up - August 11th – 12th	<input type="checkbox"/>		

Position Applied for: _____

*Please note, you must be available at least 6 out of the 7 camp weeks to be considered for a position

Are you a citizen of the United States? YES NO

If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If so, when? _____

Have you ever been convicted of a crime including child sex abuse? YES NO

Date of Birth (optional): _____



Education

High School: _____ From: _____ To: _____

Did you graduate? YES NO

College: _____ From: _____ To: _____

Did you graduate? YES NO Degree: _____ Major: _____

Post College: _____ From: _____ To: _____

Did you graduate? YES NO Degree: _____ Major: _____

References

Please list two professional references and one personal reference.

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Previous Employment

Company: _____ Phone: () _____

Address: _____

Contact: _____ Job Title: _____

Responsibilities: _____

From: _____ To: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: () _____



Address: _____

Contact: _____ Job Title: _____

Responsibilities: _____

From: _____ To: _____

May we contact your previous supervisor for a reference? YES NO

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I also understand that any offer of employment is contingent upon a satisfactory completion of a criminal and employee background check, a physical examination, drug testing and the completion of all required paperwork.

Signature: _____

Date: _____

Please attach a resume if you have one available.