

Urban Adventure Camps
APPLICATION FOR EMPLOYMENT

Urban Adventure Camps is an equal opportunity employer

5701 Cabot Dr.
Oakland, CA 94611
Phone: 510-339-0676 Fax: 510-505-9016
www.urbanadventurecamps.com
info@urbanadventurecamps.com

Position(s) Applied For _____ Date of Application _____

What subjects are you comfortable instructing (circle all that apply)? Art History Physics/Technology Biology/Natural Science

Have You Ever Applied Here Before? _____ If yes, when? _____

Are you interested in working (circle): Full Summer (10 weeks) Partial summer

If partial how many weeks and when are you available? _____

PERSONAL INFORMATION

Name (Last/First/Middle) _____ Social Security Number: _____ - _____ - _____

Present Address (Street/City/State/ZIP) _____

Permanent Address (Street/City/State/ZIP) _____

Phone Number(s) _____

Driver License Number State Expiration Date _____

EDUCATION (Most Recent First)

Name of School and Location	Degree and Date Received	Major Course of Study	Awards or Honors Received

List any additional coursework or experience that pertains to the position(s) for which you are applying:

Have you ever been convicted of a child abuse crime? Yes No

If yes, please explain: _____

Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

Can you, after employment, submit verification of your identity and legal right to work in the United States? Yes No

Are you able to physically perform the duties of the job for which you are applying? Yes No

Can you, with or without reasonable accommodation, perform the functions of the job? Yes No

Please describe how you will perform these

functions: _____

Can you meet the attendance requirements of this job? Yes No

How many days of leave did you take during the last year of your most recent job? _____

Work Experience - Beginning With The Most Recent

Employer		
Address		
Phone	Job Title	Supervisor
Dates Employed (From / To)		Reason for Leaving
Work Performed		

Employer		
Address		
Phone	Job Title	Supervisor
Dates Employed (From / To)		Reason for Leaving
Work Performed		

Employer		
Address		
Phone	Job Title	Supervisor
Dates Employed (From / To)		Reason for Leaving
Work Performed		

Employer		
Address		
Phone	Job Title	Supervisor
Dates Employed (From / To)		Reason for Leaving
Work Performed		

Salary Desired: _____ Are you currently employed? Yes No

May we contact your current employer? Yes No

On what date would you be able to start work? _____

Please list any job related organizations, clubs or professional societies to which you belong. Include any job related certifications and their expiration dates. You may exclude those which indicate race, religion, national origin, color, age or other protected status.

References

Please list three people who have supervised you in previous employment and whom we may contact.

Name	
Address	
Phone	
Business	Years Known

Name	
Address	
Phone	
Business	Years Known

Name	
Address	
Phone	
Business	Years Known

Applicant Statement

The facts set forth in this application are true and complete. I understand that if employed, false statements on this application are cause for dismissal. I hereby authorize Urban Adventure Camps to make an investigation of my employment and personal history through any investigative or credit agencies of its choice to verify the information I have provided on this application. I understand I that I will receive notice of any such investigation. I understand I will be required to consent to a pre-employment drug test as a condition to being considered for employment. If I am employed, I consent to random drug and alcohol testing as a condition of my continued employment. I understand that my failure to consent to these test or a test result which shows the presence of drugs will result in removal from consideration or disciplinary action, up to and including termination, even for a first offense. I understand that under California law, and as a condition of employment, I may be required to submit to fingerprinting and a criminal records investigation by the California Department of Justice. I understand that my failure to consent to such fingerprinting will result in removal from consideration or termination. I further understand that if employed by Urban Adventure Camps, my employment is at will and the employer/employee relationship may be terminated at any time by either party with or without cause. I agree to abide by all rules and policies of Urban Adventure Camps as set forth in the Employee Handbook and during staff training including those pertaining to safety, conduct and appearance at the facilities.

Signature of Applicant Date