



# Partners In Adventure

## 2010 Application For Employment

**June 21-Aug 13 8:30-4:30 Daily**

(additional times before camp begins for trainings and after camp ends for wrap-up)

**Name:** (please print) \_\_\_\_\_ **Date** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Best time to reach you:** \_\_\_\_\_

**Please describe your experience and education relevant to the position for which you are applying:**

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**Why do you want to work for Partners In Adventure day camp?**

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**Do you have any physical limitations that might affect your ability to assist campers?**

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**Please list 3 references with contact information:**

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**What is your experience with people with disabilities?**

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