

**DAY CAMP
COUNSELOR
PRELIMINARY APPLICATION**

COMPLETE AND RETURN TO:

**CHARTWELL HAPPY DAY CAMP
PO BOX 283 MARLTON NJ 08053, or email
CHARTWELL@CHARTWELLFUN.COM**

Date of Application _____ Name _____ Date of Birth _____

Permanent Address _____

Email _____ Phone _____

EDUCATION

Years (From-to) School Town State/Country

CAMP EXPERIENCE

Dates Camp Director City/State

PAST EMPLOYMENT OR OTHER IMPORTANT EXPERIENCES

Dates Employer/Experience Position Supervisor

CERTIFICATIONS OR OTHER RELEVANT AWARDS (INCL. DATES)



What contributions do you think you can make at camp?

What contribution do you think a well-run camp can make to children?

Are there any reasons you may have difficulty in performing any of the essential elements of the position for which you have applied?

YES _____ NO _____ If yes, please explain _____

I authorize investigation of all statements herein and release the camp and all others from liability in connection with same.

Applicant's Name (print) _____ Applicant's Signature _____