Name	Age	Date			
Social Security Number	Date of Birth				
Permanent Address					
Present Address					
U.S. Citizen (Circle) Yes No	Home Phone	ome Phone Cell Phone			
Email					
Name of School Attending (or attended	i)				
Year in School	Graduation Date				
Do you have children?					
Please list ages and genders:					
How many summers are you available	for camp work?				
What type of position are you applying	for?				
What is your experience working with children? (schools, clubs, camp, etc)					
That is your experience from the grant	omarcini (sonosis) diass) comp, com,				
Do you hold any certifications, training	, experience, or college coursework in a	iny of the following areas?			
	Check Box	Date of Expiration			
American Red Cross CPR for the Profes	ssional Rescuer				
American Heart Association BLS-C					
Nassau County Lifeguard Certification					
American Redcross Water Safety Instru	uctor				
Other					
Other					
		•			

Past Work History . Provide a full record of all employment – paid and volunteer – and explain any gaps in employment. Include any positions on camp staff. Use a separate sheet, if necessary.

Dates	Employer/Supervisor		Address/Phone		Job Description	
	<u> </u>			O NOT HAND IN WITHOUT COI oss's, Supervisors, Teachers, Co		
Name		Contact Phone Number		Email Address		Relation
riminal Record H lease explain:	lave you ever	been convicted of a cr	ime, otl	ner than a minor traffic offenso	e?	If yes,
nd all others fror	m liability in co	onnection with same. Its completed or subm	I also u	ny checks of criminal records, and created that misrepresentate the applicant will result in dis	tions or fa	alsifications
ignature				Date		
Background check		•	of Crimi	nal Justice Services (DCJS) in ad	ccordance	e with the Child

Safety Act (Chapter 260 of the Laws of 2005).

Please complete application and email to: ilissa@malibubeachcamp.com or mail to our winter office:

Camp Malibu, Inc. Attn: Ilissa Epstein 27 St. Johns Place Freeport, NY 11520