



Summer Camp Program STAFF APPLICATION

General

| | | | |
|--------------------------|-----------------------|--------------------|--|
| First name: | | Last name: | |
| Birth date (dd-MM-yyyy): | | | |
| Mailing Address: | | | |
| Email address: | | Cell phone number: | |
| Facebook: | Yes | No | |
| 4-H alumni: | Yes | No | |
| | If yes, what county?: | | |
| 4-H Camp alumni: | Yes | No | |
| | If yes, what camp?: | | |

Education

| | | | |
|---|--------------------------------------|----|--|
| What year did you graduate high school?: | | | |
| Are you attending a college or university?: | Yes | No | |
| | If yes, what college or university?: | | |
| | What is your major?: | | |
| Do you have any certifications?: | Yes | No | |
| | If yes, what certifications?: | | |
| Have you taught any classes?: | | | |
| List any extracurricular activities: | | | |
| | | | |

Previous Employment

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|--|--|--|--|
| Previous employer #1 (List name, city and phone number): | | | |
| | | | |
| Previous employer #2 (List name, city and phone number): | | | |
| | | | |

Email this application as an attachment to Neva Baltzell at nbaltzell@ufl.edu.