

III. EDUCATIONAL HISTORY

Highest Level of education:

Name and Location	Grad. Date/ Yrs. Attended	Degree
High School _____		
College _____		
Graduate School _____		
Other education _____		

IV. EMPLOYMENT HISTORY

Please list past employment, beginning with your current or last position. You may include verified work performed on a volunteer basis (Attach additional sheets if necessary.)

Company Name	Telephone	Position Held and Supervisor	Dates	Reason for Leaving
1. _____				

2. _____				

3. _____				

If you have First Aid Certification and/or CPR certificates, please indicate below giving issuing agency and date of expiration.

V. CAMP EXPERIENCE

Camp Name	Full Address and Telephone	Director's Full Name	Dates	Nature of Work
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

VI. REFERENCES (Give Below the Names of Three Persons Not Related to You Whom You Have Known At Least One Year **Or** At Least Six Months In An Employment Relationship.)

Name of Reference	Name of Business	Business Address/Telephone	Years Known
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

VII. CRIMINAL RECORD*

In answering the following you may omit any information or answer "No" with regard to any conviction, first convictions for speeding, minor traffic violations, affray or disturbance of the peace.

Have you ever been convicted of a felony? Yes No

If yes, give date and details.

Have you been convicted of a misdemeanor within the last five years? Yes _____ No _____

If yes, give date and details.

*Massachusetts requires a CORI investigation.

VIII. MISCELLANEOUS

Please indicate below any particular areas of interest or skill you may have with respect to teaching young children to be safe and excited about learning outdoors.

1. Why do you want to work at Allandale Farm Outdoor Summer Program this summer? What do you think you can contribute to our program?

2. What age group are you most comfortable with?

4's _____ 5's _____ 6/7's _____ 8-10's _____

What qualities do you particularly bring to that learning environment?

This 'camp' must comply with the regulations Mass. Department of Public Health and is licensed by the Town of Brookline.

X. CERTIFICATION _____ (Please Read Carefully Before Signing.)

I hereby affirm that the information provided on this application (and any resume submitted) is true and complete. I understand that any false or misleading representations or omissions may disqualify me from further consideration for employment and may result in discharge if discovered at a later date.

I hereby authorize ALLANDALE FARM OUTDOOR SUMMER PROGRAM. to investigate all information pertinent to my application in order to determine my qualifications for employment. I hereby authorize all persons and organizations having information relevant to my application to provide that information to ALLANDALE FARM OUTDOOR SUMMER PROGRAM. and I hereby agree to hold harmless ALLANDALE FARM OUTDOOR SUMMER PROGRAM. and all those providing information to it from any liability arising out of or as a result of the provision or use of such information. I understand that any offer of employment may be rescinded if my references are inadequate or unacceptable to ALLANDALE FARM OUTDOOR SUMMER PROGRAM.

Signature: _____ Date: _____

Please attach Resume if applicable.