



**Sept. 1<sup>st</sup> – May 31<sup>st</sup>**

- Administrative Office -

715 28th Street, South  
La Crosse, Wisconsin 54601 USA  
1-800-582-2267 FAX 1-608-787-8257  
Internationally: 001-608-787-8304

**June 1<sup>st</sup> – August 31<sup>st</sup>**

- WeHaKee Camp for Girls -

N8104 Barker Lake Road  
Winter, Wisconsin 54896 USA  
1-800-582-2267 FAX 1-715-266-2267  
Internationally: 001-715-266-3263

# Support Staff Application Form

Please return completed application to the WeHaKee Camp for Girls Administrative Office.

Name: \_\_\_\_\_ Desired Position: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone:( \_\_\_\_\_ ) \_\_\_\_\_ Business Phone:( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone:( \_\_\_\_\_ ) \_\_\_\_\_

## Education - List Name & Highest Grade Completed

High School Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

College Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

## Employment Experience - List Chronologically

Position/Nature of Work	Dates	Employer/Company	Phone	Reason for Leaving

## Volunteer Experience

Position/Nature of Work	Dates	Employer/Company	Phone	Reason for Leaving

## Camp Experience - As a Camper or Staff Member

Camp Name	Camper / Staff	Camp Description/Work Experience/Length of Time

## Licensures / Certified Training

Title	Date
Food Service:	
CPR	
First Aid	
Emergency Response	
Other:	



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**References**

Please provide three non-relative professional references – Give each a reference form.

Name	Relationship	Phone Number	Years Known

**Please Respond to the Following Questions - Attach Additional Sheets if Necessary**

- Will you be at least 18 years of age by June 1 of this year?  Yes  No
- Do you hold a valid driver's license?  Yes  No
- Can you perform the essential functions of the position you are applying for without special accommodations? *(Please explain - attach additional sheet, if necessary)*  Yes  No
- Have you ever physically, emotionally, or sexually abused a child? *(If yes, please explain – attach additional sheet, if necessary)*  Yes  No
- Have you ever been convicted of a misdemeanor, felony, or other crime? *(If yes, please explain – attach additional sheet, if necessary)*  Yes  No
- Please indicate any special skills or activities that you would like to share with the camp:
- Please list your connection (past or present) with WeHaKee Camp for Girls or the Sinsinawa Dominican Sisters:
- Tell us why you are interested and qualified for the position you are applying for.

**Availability**

Please indicate the dates when you are available to begin employment at WeHaKee.

Dates: \_\_\_\_\_

I hereby attest that the information I have provided in this application is accurate and truthful. This is not a binding agreement. All information becomes part of the future employee personnel file.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_