



Easterseals Colorado
Rocky Mountain Village
 PO Box 115
 Empire, Colorado 80438
 Phone: 303-569-2333
 Fax: 303-569-3857



*Email completed applications to campinfo@eastersealscolorado.org or fax/mail using the addresses listed above.

2020 Summer Employment Application for RETURNING Staff
 (Staff members who have not worked at camp for over 12 months need to complete the new staff application)

Position(s) Desired: _____

Easterseals Colorado is dedicated to equal opportunities. We provide equal employment opportunities to all individuals based on job-related qualifications and ability to perform a job, without regard to age, sex, race, color, religion, creed, citizenship, ancestry, sexual orientation, gender expression, marital status, veteran status, national origin, disability or any other protected classification. It is our policy to maintain a non-discriminatory environment free from intimidation, harassment or bias based upon these grounds.

Name: _____ Date: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different from Permanent Address): _____

City: _____ State: _____ Zip: _____

Home Phone (____) _____ Cell Phone (____) _____

Email: _____

College: _____ Major: _____

Are you: Age 16 or over? Age 18 or over? Age 21 or over?

Dates Available: _____

T-Shirt Size (Optional, used for staff uniform) _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

- Describe something that you learned during your experience at RMV? How will you build upon that during this coming summer?

- 2) What are some things you would like to personally improve upon this summer? How can we support you in achieving these goals?

- 3) Explain how you will be a positive role model to new staff?

- 4) If you are applying for a program staff position, what types of leadership, mediation and/or organizational skills do you possess that qualify you for this position?

- 5) What suggestions do you have for full-time staff to improve RMV?

- 6) What is a piece of advice you would offer a new staff member?

You may attach extra paper or send an additional email if more space is needed.

AFFIDAVIT:

Please read each statement carefully before signing. I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand that if I am extended an offer of employment, it may be conditioned upon my successful passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying. I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required. I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without cause and with or without notice. Any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in section 18-8-503, CRS., and, upon conviction thereof, shall be punished accordingly. I have read, understand, and by my signature, consent to these statements.

Signature _____

Date _____

Name : _____	Year : _____	Page 2
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