Application for Employment Broyhill Leadership Conferences

Tomorrow's America Foundation, Inc.

tafcamp@broyhill-leadership.org Phone: (803) 628-0000

www.broyhill-leadership.org

In order to protect the well-being of the youth attending camp, Broyhill Leadership Conferences will inquire to the accuracy of information supplied in the application process for all applicants before staff assignments are made. This inquiry will include, but is not limited to, reference checks with past employers, the military, educational institutions, volunteer organizations, civic groups, and law-enforcement agencies.

PERSONAL

NameFirst	NAC-Julia and	Maiden if annihable	l and
Other names by which known		Maiden if applicable	Last
Address			
	City		State Zip
How long have you lived at th	is address? From:	to Present.	
Previous Addresses, past 10 1.)			es on another sheet of paper.)
2.)			
Phone: Home	Work		
	Work E-mail		
	Social Security #		
Marital Status	Spouse's Name:		
Are you a U.S. citizen?	Visa type, if not US	citizen	
Do you have a valid driver's li	cense?		
Have you ever been bonded?	If yes, with wh	at employer?	
Have you served in the militar		T (D)	Branch
Do you have a CPR/Lifesaving Certificate:		Date of expiration	
•			n a minor traffic violation, or are se related offenses?
you now under charges for ar	iy cilillilal ollelise, iliciddilig	OOK TOTALOG OF OFFICE GOOD	

1.) What do you feel are three of the greatest moral crises facing our nation's youth?					
2.) Name five (5) well known <u>contemporary</u> people whom you admire.					
1)					
2)					
3)					
5)					
o)					
3.) What is the greatest value that guides your life?					
4) What is your favorite movie?					
5) What is your favorite book?					
6) What is your favorite TV show?					
7) Authorities interests habities					
7) Activities, interests, nobbles?					

WORK EXPERIENCE (PAST 10 YEARS):

If you are an educator, how many years experience do you have in teaching/administration? Show present employer first and work back. If necessary, list additional employers on another sheet of paper. (1.) Employer Name Position/Job description Employer address (street & number) City _____ State ____ Zip Code ____ Date started _____ Date left _____ Supervisor's name _____ Title ____ Phone # Reason for leaving (2.) Employer Name _____ Position/Job description Employer address (street & number) City _____ State ____ Zip Code ____ Date started _____ Date left _____
 Supervisor's name
 Title
 Phone #
 Reason for leaving (3.) Employer Name Position/Job description _____ Employer address (street & number) City _____ State ____ Zip Code ____ Date started _____ ____ Date left _____ Supervisor's name Title Phone # Reason for leaving _____ (4.) Employer Name Position/Job description Employer address (street & number) City _____ State ____ Zip Code ____ Date started ____ Date left _____ Supervisor's name _____ Title ____ Phone # ____ Reason for leaving ____ (5.) Employer Name Position/Job description Employer address (street & number) City _____ State ____ Zip Code ____ Date left Date started _____ Supervisor's name Title Phone #

Reason for leaving

EDUCATION

School/College/University Location (City, State)	Dates Attended	Degree/ Certification	Graduated	
			Υ	N
			Υ	N
			Υ	N
			Υ	N

EXPERIENCE WITH YOUNG PEOPLE

(i.e. School, Clubs, Sports, Scouts, Church, etc.- Please describe the nature of work, length of experience and responsibilities.) 1.) 2.) 3.) 4.) **REFERENCES**: 1.) Name Address City State Zip Code Phone 2.) Name Address Zip Code City State Phone

PLEASE COMPLETE AND RETURN TO THE ADDRESS ON THE FRONT PAGE

State

Address

Phone

Zip Code

Name

City

3.)