



# ST. JOHN BOSCO WILDERNESS CAMP

## APPLICATION FOR EMPLOYMENT 2018

Please Print

Position Applied For: \_\_\_\_\_

email: [manager@johnboscocamp.com](mailto:manager@johnboscocamp.com)

mail to: **St. John Bosco Camp**  
Box 3002, Saskatoon, Sk S7K 3S9  
Phone / fax: 1-844-752-6726  
1-844 SJ BOSCO

Name: \_\_\_\_\_

email: [info@johnboscocamp.com](mailto:info@johnboscocamp.com)

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Dates Available to Work:

Check One

Note: all dates are approximate at this time and will be verified upon hiring

Full / Part

School Visitations: (February to Mid May)

Spring Cleanup/Setup May 14 - May 18

Leadership Training – Spring May 22 – May 26

Leadership – Senior Out-tripping May 28 - June 1

Spring Programs June 4 – June 27

Leadership Training – Summer July 1 – July 6

Summer Session:

1st Camp July 8 – 18

2nd Camp July 22 – August 1

3rd Camp August 8 – 18

Please list any dates that you will not be available within the periods

checked above: \_\_\_\_\_

\_\_\_\_\_

### Skill Certifications:

Do you have any of the following certifications?

	Yes	Level	Date of Certification
Wilderness First Aid	<input type="checkbox"/>	_____	_____
Standard First Aid	<input type="checkbox"/>	_____	_____
CPR	<input type="checkbox"/>	_____	_____
Bronze Medallion	<input type="checkbox"/>	_____	_____
Bronze Cross	<input type="checkbox"/>	_____	_____
NLS	<input type="checkbox"/>	_____	_____
WSI Certification	<input type="checkbox"/>	_____	_____
Canoe Instructor	<input type="checkbox"/>	_____	_____
Pleasure Craft Operator	<input type="checkbox"/>	_____	_____

Please include copies of certificates for any of the above.

Do you have a valid Driver's License ? Yes  No

Are you less than 18 years of age? Yes  No

### Education:

Secondary Education: Completed Yes  No

If incomplete, number of years completed. \_\_\_\_\_

Post Secondary Education

Diploma / Degree

Year Obtained

Field of Study

_____	_____	_____
_____	_____	_____
_____	_____	_____

Licenses and professional accreditations

Other courses, certifications or applicable knowledge (software, industrial equipment, etc.)

\_\_\_\_\_



**Name, Address and Phone Number of two of your last employers:**

1) \_\_\_\_\_

Your Position: \_\_\_\_\_ Year: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2) \_\_\_\_\_

Your Position: \_\_\_\_\_ Year: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

May we approach your previous

Employers as listed for a reference check?

Job #1 Yes  No

Job #2 Yes  No

List other references that can speak to your suitability for this type of work.

Name, full address, phone number and relationship to you (not relatives)

1] \_\_\_\_\_

2] \_\_\_\_\_

3] \_\_\_\_\_

SJBWC provides accommodation and meals while you are at camp. Camp wages include a volunteer component based on your skill certifications and experience.

Are you willing to work at camp knowing that part of your compensation will be in the form of room and board and volunteer hours? Yes  No

SJBWC has a zero tolerance policy with regards to drug use while an employee. Are you willing to abide by this policy? Yes  No

SJBWC does not permit the use of alcohol by employees while camp is in session. Are you willing to abide by this policy? Yes  No

Have you ever been convicted of a criminal or sexual offense? Yes  No

If yes, explain: \_\_\_\_\_

All employees and volunteers must provide camp with a current criminal record and vulnerable sector check.

Please include resume and copy of current Swimming and First Aid or other relevant certifications.

I hereby declare that the information provided is true, accurate and complete to my knowledge.

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