



Summer Employment Application

Check Weeks Available:

June 25-29 ___ July 16-20 ___

July 2-6 ___ July 23-27 ___

July 9-13 ___ July 30 - Aug 3 ___

Name: _____
First Last

Current Address: _____
Street City zipcode

Telephone: () _____ () _____
Home Cell

Date of Birth _____ Email _____

Education Information	Name of School	Year Grad
High School		
University/College		

Work Experience	Place of Employment	Job	Supervisor's Name	Telephone #
From _____ To _____				
From _____ To _____				

References – Name	Telephone	Relationship
1.		
2.		

I certify that the information contained in this application is accurate.

Date:	IF you are under 18 your parents must sign this application below. I give my son/daughter permission to work at Camp Giant Steps:
Signature:	

Submit: gstepsdirector@aol.com or fax: 314-932-1053 7281 Sarah St, 63143

Applicants will be notified for an interview by email or phone.

Interview date:	Hourly pay:	Initials: _____ GS _____
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