

# Summer Jobs 2005

Spend a rewarding summer at Camp Sussex, a co-ed sleep-away camp for children in Northern New Jersey (about 55 miles from New York City). Camp Sussex provides an affordable and enriching summer experience for children 7 - 14 years old.

## **Male & Female General Counselors**

**Athletic Instructors**

**Arts & Crafts Instructor**

**Ceramics Instructor**

**Dance Instructor**

**Dramatics Instructor**

**Gymnastics Instructor**

**Lifeguards/Swim Instructors**

**Photography Instructor**

**Pioneering Instructor**

**Tennis Instructor**

**Kitchen Personnel**

**Kitchen Personnel** (cooks, chefs, baker)

**Kitchen Maintenance** (porters, dishwashers, pot washers)

**Student Nurse, RN, LPN, EMT**

**Interested** - Contact Gary Cardamone (Camp Director)

for application or further information at:

(718) 261-8700 x11 or (856) 753-9265

email - cardy1@aol.com or CampSussex@aol.com

Visit our Web Site: [www.CampSussex.org](http://www.CampSussex.org)

**Work Dates: June 24th - August 19th**

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# Interview Dates Summer 2005

## No Appointment Needed!

Saturday, December 18th	10 am - 3 pm
Saturday, January 15th	10 am - 3 pm
Saturday, January 29th	10 am - 3 pm
Saturday, February 12th	10 am - 3 pm
Saturday, February 26th	10 am - 3 pm

Just come to the office on one of the above dates with:

- 1 - Two letters of recommendation from a teacher or employer
- 2 - Copy of Social Security Card
- 3 - Copy of Birth Certificate
- 4 - Working papers
- 5 - Copies of your Medical Insurance Card and Prescription Card

### *Camp Sussex*

1-718-261-8700 x11

110-11 Queens Blvd. Apt 1BB, Forest Hills, Queens  
(72nd Drive & Queens Blvd.)

Gary's Home Office: 1-856-753-9265

Email: Cardy1@aol.com

**E, F, R or V Trains to 71st & Continental Avenue**

Exit Train Station - North Side of Queens Blvd. Walk 4 Blocks to  
72nd Drive. Entrance is at the Side of the Building.

**You Must Be Available For The Following Dates:**

**June 24 - August 19**

**Camp Sussex Staff Application – 2005**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Home Address \_\_\_\_\_ Apt # \_\_\_\_\_

City, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone # ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age by June 1<sup>st</sup> \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_

College Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

College Telephone # ( ) \_\_\_\_\_

Position you are applying for \_\_\_\_\_ 1st \_\_\_\_\_ 2nd \_\_\_\_\_

Willing to Volunteer? \_\_\_\_\_ If not what salary do you expect? \_\_\_\_\_

Were you a camper at Camp Sussex? \_\_\_\_\_ Yes \_\_\_\_\_ No What years? \_\_\_\_\_

Were you ever a counselor at Camp? \_\_\_\_\_ Yes \_\_\_\_\_ No what years? \_\_\_\_\_

Who referred you to Camp Sussex? \_\_\_\_\_

College you attend \_\_\_\_\_ Major \_\_\_\_\_ Graduation Date \_\_\_\_\_

College Credits as of June 1<sup>st</sup> \_\_\_\_\_

High School \_\_\_\_\_ Present H.S. Grade \_\_\_\_\_ Graduation Date \_\_\_\_\_

Do you smoke cigarettes? \_\_\_\_\_ Yes \_\_\_\_\_ No Do you take any type of illegal drugs? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have a Police Record? \_\_\_\_\_ Yes \_\_\_\_\_ No

Camp Work Experience: Name of Camp \_\_\_\_\_ Year \_\_\_\_\_ Salary \_\_\_\_\_

Duties \_\_\_\_\_

Does your family receive Public Assistance or other federal program income? \_\_\_\_\_ Yes \_\_\_\_\_ No

TANF Case # \_\_\_\_\_ Name of Center \_\_\_\_\_

Below are some of the Activities at Camp Sussex. Put 5 if you are an *EXPERT*, 3 if you could *ORGANIZE & TEACH* and 1 if you can *ASSIST EFFECTIVELY*.

- |                                       |                                      |  |                                     |
|---------------------------------------|--------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Basketball   | <input type="checkbox"/> Volleyball  | <input type="checkbox"/> Fire Building   | <input type="checkbox"/> Ceramics   |
| <input type="checkbox"/> Field Hockey | <input type="checkbox"/> Football    | <input type="checkbox"/> Group Games     | <input type="checkbox"/> Gymnastics |
| <input type="checkbox"/> Handball     | <input type="checkbox"/> Photography | <input type="checkbox"/> Softball        | <input type="checkbox"/> Tennis     |
| <input type="checkbox"/> Swimming     | <input type="checkbox"/> Nature      | <input type="checkbox"/> Art             | <input type="checkbox"/> Dance      |
| <input type="checkbox"/> Rowing       | <input type="checkbox"/> Diving      | <input type="checkbox"/> Canoeing        | <input type="checkbox"/> Hiking     |
| <input type="checkbox"/> Life Saving  | <input type="checkbox"/> Working Out | <input type="checkbox"/> Camp Crafts     | <input type="checkbox"/> Piano      |
| <input type="checkbox"/> Guitar       | <input type="checkbox"/> Soccer      | <input type="checkbox"/> Lacrosse        | <input type="checkbox"/> Football   |
| <input type="checkbox"/> Stage Craft  | <input type="checkbox"/> Acting      | <input type="checkbox"/> Outdoor cooking | <input type="checkbox"/> Computers  |
|                                       |                                      |  | <input type="checkbox"/> Other      |

Circle Age Group you prefer for Bunk Duty: 7-8 9-10 11-12 13-14 Any Group

Do you have medical insurance? \_\_\_\_\_ If yes, please provide a copy (front & back; readable copies please) of your medical insurance card & prescription card.

Driver's License \_\_\_\_\_ Yes \_\_\_\_\_ No License # \_\_\_\_\_

Please provide a copy of your License.

Reference: Name \_\_\_\_\_  
Address \_\_\_\_\_

Reference Telephone # ( ) \_\_\_\_\_

Your Signature \_\_\_\_\_

**(OVER)**

**Job History:**

Please list the last two places of employment (full or part time). Start with your present or most recent employer.

Company Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone # and Area Code (     ) \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Job Title and Describe Your Work \_\_\_\_\_  
\_\_\_\_\_

Employed Months/Years     From \_\_\_\_\_     To \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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Company Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone # and Area Code (     ) \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Job Title and Describe Your Work \_\_\_\_\_  
\_\_\_\_\_

Employed Months/Years     From \_\_\_\_\_     To \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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**OFFICIAL USE ONLY**

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

College Credits: \_\_\_\_\_

Age: \_\_\_\_\_

Salary: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Assignment: \_\_\_\_\_