

FRIENDSHIP VENTURES
10509 108TH ST. NW
ANNANDALE, MINNESOTA 55302
(952) 852-0101 or (800)450-8376

Check location where interested in employment:

- Camp Friendship**
- Eden Wood Center**
- Camp New Hope**

APPLICATION FOR EMPLOYMENT

NAME _____ DATE _____
First Middle Last

ADDRESS _____
Street City State Zip

TELEPHONE - Daytime (_____) _____ Evening
(_____) _____

EMAIL _____

EDUCATION: SCHOOLS ATTENDED (circle years completed in each category)

HIGH SCHOOL 1 2 3 4 Name and location _____

COLLEGE 1 2 3 4 Name and location _____

POST GRADUATE 1 2 3 4 Name and location _____

SPECIAL SCHOOLS OR TRAINING: _____

DESCRIBE FURTHER DETAILS OF YOUR TRAINING OR EDUCATION WHICH ARE PERTINENT, INCLUDING CERTIFICATES OR LICENSES: _____

POSITION APPLYING FOR: _____

SALARY EXPECTED _____ PER HOUR DATE AVAILABLE _____

EMPLOYMENT HISTORY (including United States Military Service)

LIST ALL POSITIONS HELD STARTING WITH YOUR MOST RECENT AND WORKING IN REVERSE CHRONOLOGICAL ORDER

NAME OF EMPLOYER _____ **PHONE** (____) _____

ADDRESS _____
Street City State Zip

SUPERVISOR _____ **POSITION HELD** _____

DATES EMPLOYED - FROM _____ **TO** _____ **SALARY**

REASON FOR LEAVING _____

NAME OF EMPLOYER _____ **PHONE** (_____) _____

ADDRESS _____

Street City State Zip

SUPERVISOR _____ **POSITION HELD** _____

DATES EMPLOYED - FROM _____ **TO** _____ **SALARY** _____

REASON FOR LEAVING _____

NAME OF EMPLOYER _____ **PHONE** (_____) _____

ADDRESS _____

Street City State Zip

SUPERVISOR _____ **POSITION HELD** _____

DATES EMPLOYED - FROM _____ **TO** _____ **SALARY** _____

REASON FOR LEAVING _____

NAME OF EMPLOYER _____ **PHONE** (_____) _____

ADDRESS _____

Street City State Zip

SUPERVISOR _____ **POSITION HELD** _____

DATES EMPLOYED - FROM _____ **TO** _____ **SALARY** _____

REASON FOR LEAVING _____

Have you ever been convicted of a misdemeanor or felony of a non-traffic nature? Yes/No If yes, please explain.

I certify that the information give herein and accompanying resume or documentation is true and complete to the best of my knowledge. I authorize investigation of all statements this information contains as may be necessary in arriving at an employment decision; including, but no limited to, contacting my current or former employers and contacting references. In the event of employment, I understand that false or misleading information given herein or during my interview(s) may result in discharge. I understand that this application does not create a contract of employment. I understand that if hired I am obliged to comply with any and all current or subsequently adopted Friendship Ventures policies. I agree if I am hired, my employment is for no definite period of time, and may, regardless of date of payment of my wages or salary, be terminated at any time with or without reason, and for any reason. I have read everything in the staff application packet and to the best of my knowledge, I meet the minimum qualifications for the position(s) I have applied for.

Signature of Applicant Date

Signature of parent/guardian is also required if applicant under the age of 18 Date Relationship

Please send completed application to Friendship Ventures
www.friendshipventures.org
Friendship Ventures is an Equal Opportunity Employer