

Elks Camp Grassick
PO Box F
Dawson, ND 58428
701-327-4251

Returning Staff Application

Date of Application: _____ Date Received at ECG: _____

IDENTIFYING INFORMATION

Name: _____ Gender: Male Female

Nickname or Preferred Name: _____ T-Shirt Size: _____

Social Security Number: _____ (Can be supplied after hire if preferred)

Date of Birth: _____ Age as of Camp Dates: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Telephone: Home: _____ Cell: _____

Permanent Address (if different from above): _____

City: _____ State: _____ Zip: _____

Email: _____

How would you prefer to receive information from Elks Camp Grassick?

Email Provided Other: _____

Mail to Current Address Mail to Permanent Address

Name of Parent(s) or Nearest Relative: _____

Emergency Contact:

Contact Name: _____ Relationship to Applicant: _____

Address: _____

Home Phone: _____ Cell Phone: _____

What position are you applying for? _____

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EDUCATION

High School: _____ Location: _____

College: _____ Location: _____

Major: _____ Minor: _____

Degree Earned: _____

Please list any extracurricular or volunteer activities you are involved in:

SKILLS AND QUALIFICATIONS

What are 3 things that you think you did well at Camp Grassick in your previous summer?

What are 3 areas where you think you could improve in your work at Camp Grassick?

What is something that you learned in your summer(s) at Camp Grassick?

What are two goals that you have for this summer?

Is there anything else you would like to add? (Please attach an additional page if needed.)