

# Project Extreme

## Staff Application

Return Application to:

Project Extreme  
335 Central Avenue  
Lawrence, NY 11559  
Ph. 516.612.3922  
Fx. 516.612.3924  
ayalah@projectextreme.org

A Recent  
Photo Must  
Be Submitted  
With  
Application

Date of Application: \_\_\_\_\_

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

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

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

Permanent Address \_\_\_\_\_  
Street & Number, City, State, Zip

Current Address \_\_\_\_\_  
Street & Number, City, State, Zip

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Email \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Emergency Contact Information: Name \_\_\_\_\_

Phone \_\_\_\_\_ Relationship: \_\_\_\_\_

Personal Rav \_\_\_\_\_ Family shul \_\_\_\_\_

Interested in the following programs: (check)

\_\_\_ Camp Extreme \_\_\_ Shabbatons \_\_\_ Yom Tov Programs \_\_\_ Night Events \_\_\_ Miryam's House

Summer 2018 Dates Available From \_\_\_\_\_ to \_\_\_\_\_

How did you learn about Project Extreme? \_\_\_\_\_

Is there a particular person that referred you? \_\_\_\_\_

**Past Work History** Provide a full record of all employment – paid and volunteer- Use a separate sheet, if necessary.

Dates	Employer/Supervisor	Address and Phone	Nature of Position

**References** Give names and addresses of three persons (not relatives) having knowledge of your character, experience, work habits, and ability.

Name	Relationship	Phone, Email

**Past Camper Experience**

Dates	Camp & Director	Location

**Past Camp Counselor Experience**

Dates	Camp & Director	Location	Position

**Education: High School and Beyond**

Years	School	Major and Minor	Degree Granted

Do you have a valid driver's license? \_\_\_ Yes \_\_\_ No State \_\_\_\_\_ License # \_\_\_\_\_

Do you have a commercial driver's license? \_\_\_ Yes \_\_\_ No

Do you have a valid passport? \_\_\_ Yes \_\_\_ No Issuing Country \_\_\_\_\_ Expiration  
Date \_\_\_\_\_ Passport Number \_\_\_\_\_

**Certification and Camp Support Staff Skills** In the following list please mark with an “E” those items in which you have experience and skills. Mark with a “C” those for which you hold a current certification and attach a copy of your certification

**Health Safety**

- \_\_\_ CPR
- \_\_\_ First Aid
- \_\_\_ Lifeguard
- \_\_\_ Nursing
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Maintenance**

- \_\_\_ Auto Mechanics
- \_\_\_ Carpentry
- \_\_\_ Electrical
- \_\_\_ Plumbing
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Food Services**

- \_\_\_ Cooking/meal preparation
- \_\_\_ Food handlers permit
- \_\_\_ Menu planning
- \_\_\_ Purchasing
- \_\_\_ Sanitation
- \_\_\_ \_\_\_\_\_

Please tell us something about yourself that sets you apart and makes you most fit for this job. What specific contributions do you think you can make at Project Extreme?

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Have you had experience with teens at-risk? What does the term “at-risk behavior” mean to you? Please explain.

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<b>Please rate the following:</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Needs Improvement</b>
Ability to wake up early	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to follow directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Positive Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to take initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to think creatively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commitment to Torah and Mitzvos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commitment to Halacha	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Modesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Harassment** Project Extreme prohibits all forms of harassment by our employees. This includes sexual, racial, religious, and other forms of harassment. Have you been accused of harassment of any person including, but not limited to, workplace harassment? (Note: A prior conviction is not an automatic bar to employment. The type of conviction and when it occurred will be evaluated by Project Extreme before a decision is made.)

\_\_\_ Yes \_\_\_ No

**Explain:**

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**Criminal Record** Have you ever been convicted of a crime, other than a minor traffic offense? If yes, please describe. (Note: A prior conviction is not an automatic bar to employment. The type of conviction and when it occurred will be evaluated by Project Extreme before a decision is made.) \_\_\_ Yes \_\_\_ No

**Explain:**

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I authorize investigation of all statement herein, including any checks of criminal record, and release Project Extreme and all others from liability in connection with the same. I understand that, if employed, I will be at at-will employee unless there is an agreement or law which alters that status. Furthermore, I understand that any agreement must be in writing and signed by the designated official. I also understand that untrue, misleading, or omitted information herein or in other documents completed by the application may result in dismissal, regardless of the time of discovery by the program.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**APPLICATION will be reviewed when a picture has been received.**

Thank you for your interest in being part of the Project Extreme. We appreciate the time you took to complete this form. We will review your application and contact you shortly.