

# Counselor Contract



## Personal Information

<b>Name</b>	First:				Last:		
<b>Date of Birth</b>							
<b>Address</b>							
<b>Phone Number(s)</b>	Home:				Cell:		
<b>Email Address</b>							
<b>Date of Availability</b>							
<b>T-shirt size</b>	Circle one:	S	M	L			
<b>Campus Applying To Work At</b>	Circle one:	Winnetka	Highland Park				

## Special Talents

Gifted and unique counselors are what make Oasis a success! Please list any hobbies, interests, or special qualities you possess that can add to the summer excitement.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Academic History

<b>High School</b>	Year in School:	
<b>Undergrad/College</b>	Year in School:	
<b>Graduate School</b>	Year in School:	

<b>Other (specify)</b>	
------------------------	--

**Employee's Background**

Experience	#1	#2	#3
<b>Employer</b>			
<b>Role</b>			
<b>Reason for Leaving</b>			
<b>Dates of Employment</b>			
<b>Hourly Salary</b>			

**Reference Information**

	#1	#2
<b>Name</b>		
<b>Relationship</b>		
<b>Phone</b>		

**Emergency Contact Information**

	#1	#2
<b>Name</b>		

	#1	#2
<b>Relationship</b>		
<b>Phone Numbers Provide 2</b>		

**To Do List:**

Please initial in the box on the right to signify that you have read, understand, and are agreeing to the information.

<b>I have completed the application.</b>	
<b>I have reviewed all of <a href="http://www.OasisDayCamp.com">www.OasisDayCamp.com</a> and can speak about the program's calendar of events, schedules, activities and routines.</b>	
<b>I have provided factual information.</b>	
<b>I understand that inaccurate or false information may result in the voiding of this contract. I acknowledge that I am required to comply with all federal, state and county laws and Oasis Summer Day Camp rules and regulations.</b>	
<b>I am available to work every scheduled camp day and will not knowingly miss a day.</b>	
<b>I understand that attendance at our Open House AND Training Session is considered a prerequisite of the job and is not paid work.</b>	
<b>I understand that I will be required to actively participate in camp activities with Oasis clients.</b>	

Employee's Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

Rate of Pay: \_\_\_\_\_

**Please mail completed forms to:**

**Oasis Summer Day Camp, LLC**

~~PO Box 1797~~

~~Evanston, Illinois 60201~~