

**APPLICATION FOR CAMP COUNSELOR EMPLOYMENT 2017**  
 TEXAS MARITIME MUSEUM, 1202 NAVIGATION CIRCLE, ROCKPORT, TX 78382  
 PHONE: 361-729-1271, FAX: 361-729-9938, EMAIL: [educator@texasmaritimemuseum.org](mailto:educator@texasmaritimemuseum.org)



**DATE** \_\_\_\_\_

**PERSONAL INFORMATION**

Name (Last, First Middle)	DOB (mm/dd/yyyy)	Age	Social Security No.	
Mailing Address	City		State	Zip code
Phone	Email			
Position desired: <b>Head Counselor/Counselor</b>			Referred by:	
T-Shirt Size: Adult - Small...Medium...Large...X-Large...XX-Large...				

**EDUCATION**

Name and location of School	Years Attended	Graduate	Major
High School			
College			

**EXTRACURRICULAR ACTIVITIES, VOLUNTEER EXP. OR FORMER EMPLOYERS**

Date Mo./Yr.	Name and Address of Employer	Salary	Position	Reason for Leaving

**REFERENCES: Personal or past employer**

NAME	PHONE	BUSINESS	YEARS KNOWN

**EXPERIENCE:**

	Yes	No
Have you volunteered and/or worked at S.E.A. Camp before? ▪ If YES, give the year(s) you volunteered/worked:	<input type="checkbox"/>	<input type="checkbox"/>
Have you volunteered and/or worked at H2Odyssey before? ▪ If YES, give the year(s) you volunteered/worked:	<input type="checkbox"/>	<input type="checkbox"/>
Have you volunteered and/or worked at other youth activities? ▪ If YES, list experience with other youth programs/organizations:	<input type="checkbox"/>	<input type="checkbox"/>

**ADDITIONAL INFORMATION: Mark each answer YES or NO.**

Do you use illegal drugs? \_\_\_ YES \_\_\_ NO

Have you ever been convicted of a criminal offense? \_\_\_ YES \_\_\_ NO

Have you ever been charged with child neglect or abuse? \_\_\_ YES \_\_\_ NO

Has your driver's license ever been suspended or revoked? \_\_\_ YES \_\_\_ NO

Other than the information above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people?  
 \_\_\_ YES \_\_\_ NO

(If YES to any above please attach a letter of explanation.)

**AVAILABILITY (check all that apply - all applicants are eligible to work all camps):**

**S.E.A (Summer Experience in Aransas) Camp (8:30 AM – 12:30 PM)**

- |                                  |            |   |
|----------------------------------|------------|---|
| <input type="checkbox"/> Week 1  | June 12-16 | 1 <sup>st</sup> & 2 <sup>nd</sup> Grade |
| <input type="checkbox"/> Week 2  | June 19-23 | 3 <sup>rd</sup> & 4 <sup>th</sup> Grade |
| <i>Vacation June 26 – July 7</i> |            |   |
| <input type="checkbox"/> Week 3  | July 10-14 | 1 <sup>st</sup> & 2 <sup>nd</sup> Grade |
| <input type="checkbox"/> Week 4  | July 17-21 | 3 <sup>rd</sup> & 4 <sup>th</sup> Grade |
| <input type="checkbox"/> Week 5  | July 24-28 | 5 <sup>th</sup> Grade                   |

**H<sub>2</sub>Odysey Camp (1:00 PM – 4:30 PM)**

- |                                  |            |                           |
|----------------------------------|------------|---------------------------|
| <input type="checkbox"/> Week 1  | June 12-16 | K – 5 <sup>th</sup> Grade |
| <input type="checkbox"/> Week 2  | June 19–23 | K – 5 <sup>th</sup> Grade |
| <i>Vacation June 26 – July 7</i> |            |                           |
| <input type="checkbox"/> Week 3  | July 10-14 | K– 5 <sup>th</sup> Grade  |
| <input type="checkbox"/> Week 4  | July 17-21 | K – 5 <sup>th</sup> Grade |

**AUTHORIZATION**

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application will be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.”

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

For Office Use Only:

Wage of Employee:	Position:	Paid Experience:
	Admiral/Intern	3+ yrs.
	Captain	3+ yrs.
	Lieutenant	2 <sup>nd</sup> yr. Paid Counselor
	Ensign	1 <sup>st</sup> yr. Paid Counselor

**\*All wage pay grade decisions are at the discretion of the Camp Director and subject to Grant Funding restrictions. A summer bonus is possible but reliant entirely on work performance evaluations and funding.\***