

**PA LIONS BEACON LODGE CAMP
114 SR 103 SOUTH
MOUNT UNION, PA 17066**

**PHONE: 814-542-2511
FAX: 814-542-7437**

Enclosed you will find the application form requested for employment at the PA Lions Beacon Lodge Camp. This application is for Housekeeping or Kitchen Staff only.

Please complete the form **completely!**

1. References must include FULL name, COMPLETE address, and TELEPHONE NUMBER.
2. Understand that if hired you will be expected to work the schedule assigned. If you have special events scheduled over the summer these dates must be included on the application.
3. If hired you will be required to have a “Child Line Check” and a “Criminal Background Check” & FBI Fingerprint completed prior to your start date. Forms will be provided. The total cost is \$56. Upon completion of 6 weeks of employment you will be reimbursed for ½ of the cost (\$28).
4. *If under 18 years of age, you will need a **worker’s permit**. Please refer to your High School Advisor for this information. IF A HIGH SCHOOL STUDENT YOU DO NOT NEED CLEARANCES.*
5. Hiring takes place from February through April. Please indicate if you will be available to work weekends in March, April or May. Full time employment begins the last week of May. Camp closes the 3rd week of August. Opportunities for continued employment will depend on off-season rentals.
6. The schedule for Kitchen Staff at this time is: (subject to change)
Morning Shift 6:30am – 1:00pm (Dishwasher 7:30am – 2:30pm)
Afternoon Shift 1:00pm – 6:30pm (Dishwasher 3:00pm-7: 30pm)
Kitchen Staff alternate weekly schedule. Kitchen staff works weekends.
7. The schedule for Cleaning Staff at this time is: (subject to change)
Monday – Friday 8am to 4pm and every other Saturday; Sundays off with the exception of the 3rd Sunday in July.
8. IT IS IMPORTANT THE APPLICATION BE COMPLETED IN BLACK OR BLUE INK. PLEASE PRINT LEGIBLY. CLEARLY PRINT YOUR SOCIAL SECURITY NUMBER. PLEASE RETURN THE APPLICATION TO THE ABOVE ADDRESS.

IF YOU WISH TO DROP YOUR APPLICATION OFF IN PERSON, OFFICE HOURS ARE 7:30AM TO 4:00PM MONDAY – FRIDAY. CLOSED WEEKENDS.

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www.beaconlodge.com

OFFICE USE ONLY
POSITION: _____
UNIT: ADULT C.V. _____
HOURLY WAGE: _____
START DATE: _____
CONTRACT SENT: ___ REC'D: ___

SUPPORT STAFF APPLICATION

PLEASE TYPE OR PRINT ALL INFORMATION IN BLACK INK.

NAME: _____ PHONE: (____) _____
(AS IT APPEARS ON YOUR SS CARD)

ADDRESS: _____ COUNTY: _____
(STREET, RD, BOX #, & PO BOX #)

CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY #: _____ - _____ - _____ SCHOOL DISTRICT: _____

IF UNDER 18 INCLUDE DATE OF BIRTH: _____ AGE: _____
MONTH, DAY, YEAR

DO YOU HAVE YOUR WORKER'S PERMIT FOR 2011? YES { }, NO { }, N/A { } OVER AGE 17

GENERAL PHYSICAL CONDITION:

EDUCATION:

HIGH SCHOOL: _____ YEAR OF GRADUATION: _____
ADDRESS: _____ GRADE COMPLETED: _____

TRADE SCHOOL/COLLEGE: _____

ADDRESS: _____

YEAR OF GRADUATION: _____ DEGREE OR DIPLOMA: _____

INDICATE THE POSITION OR POSITIONS FOR WHICH YOU WISH TO BE CONSIDERED:

INDICATE FIRST (1) AND SECOND (2) CHOICE

HOUSEKEEPING/CLEANER { } KITCHEN: CREW LEADER { }
KITCHEN HELPER { }
DISHWASHER { }

Have you previously been employed by Beacon Lodge? Yes { }, No { } If yes, please note the name under which you were previously employed if name has changed: _____

ARE YOU AVAILABLE TO WORK FULL TIME? YES { }, NO { }

EMPLOYEES WILL BE REQUIRED TO WORK WEEKENDS. IF NOT AVAILABLE FULL TIME, HOW MANY DAYS PER WEEK ARE YOU AVAILABLE? _____

PLEASE NOTE, THIS IS A SEASONAL POSITION, WE ARE SEEKING EMPLOYEES WHOM ARE AVAILABLE FROM THE BEGINNING OF JUNE TO THE MIDDLE OF AUGUST. IF YOU NEED TIME OFF FOR (1) VACATION, (2) COLLEGE VISITATIONS, OR (3) SCHOOL SPORTS, ETC., PLEASE LIST ALL DATES YOU WILL NEED OFF. TIME OFF WILL BE CONSIDERED WITH REGARDS TO THE TIME, DATE, AND AVAILABILITY OF REPLACEMENT STAFF COVERAGE.

PLEASE LIST DATES: _____

LIST EMPLOYMENT OR OTHER EXPERIENCE THAT YOU FEEL WOULD QUALIFY YOU FOR THE POSITION FOR WHICH YOU ARE APPLYING—GIVE NAME & ADDRESS OF COMPANY, TYPE OF JOB, SUPERVISOR'S NAME AND DATES EMPLOYED.

NAME/ADDRESS: _____

SUPERVISOR: _____

TYPE OF JOB: _____

DATES EMPLOYED: _____

NAME/ADDRESS: _____

SUPERVISOR: _____

TYPE OF JOB: _____

DATES EMPLOYED: _____

NOTE: IF YOU ARE UNDER EIGHTEEN (18) AND HIRED BY THE PA LIONS BEACON LODGE CAMP, YOU WILL BE REQUIRED TO SECURE A WORK PERMIT FROM YOUR SCHOOL OFFICE. THIS PERMIT MUST BE PRESENTED TO THE CAMP OFFICE PRIOR TO YOUR FIRST DAY OF WORK.

IF UNDER EIGHTEEN SIGNATURE OF PARENT OR GUARDIAN IS REQUIRED:

SIGNATURE: _____

PRINT NAME: _____

ADDRESS: _____

HOME PHONE #: _____ WORK PHONE #: _____

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS HEREIN INCLUDING FORMER EMPLOYEES AND THE REFERENCES LISTED BELOW AND RELEASE THE CAMP AND ALL OTHERS FROM LIABILITY IN CONNECTION WITH THE SAME. I UNDERSTAND THAT UNTRUE, MISLEADING, OR OMITTED INFORMATION HEREIN MAY RESULT IN DISMISSAL, REGARDLESS OF THE TIME OF DISCOVERY BY THE CAMP.

SIGNATURE OF APPLICANT: _____ DATE: _____

1. LIST NAME
2. COMPLETE MAILING ADDRESSES, INCLUDING ZIP CODES
3. TELEPHONE NUMBERS
4. NO RELATIVES

NAME: _____ PHONE: _____

ADDRESS: _____

RELATION TO APPLICANT: _____

NAME: _____ PHONE: _____

ADDRESS: _____

RELATION TO APPLICANT: _____