

CURRENT CERTIFICATION(S):

*Photocopies of Current Certification(s) **MUST BE ATTACHED** to This Application*

TYPE OF CERTIFICATION	Date Issued	Expiration Date	Certifying Agency	LOCATION
Responding to Emergencies				
CPR/Professional Rescuer				
Water Safety Instructor				
Lifeguard Instructor				
Waterfront Lifeguard				
Sailing Instructor				
Canoe/Kayak Instructor				
Motor Boat License				
Eagle Scout				
Other				

EMPLOYMENT HISTORY: *List most recent employment first*

DATES	EMPLOYER	ADDRESS/PHONE	POSITION	SUPERVISOR	REASON FOR LEAVING

CAMPER EXPERIENCE:

CAMP NAME & SPONSORING AGENCY (i.e. 4-H, YMCA, etc)	# of SUMMERS AT CAMP	AGE STARTED AS CAMPER	AGE LAST YEAR AS CAMPER

ALL EDUCATOR STAFF ARE REQUIRED TO BE BOTH A CABIN COUNSELOR AND ACITIVITY INSTRUCTOR

Please refer to <http://ccesuffolk.org/employment-and-volunteer-opportunities/> for list of available positions

CABIN COUNSLEOR: Please check one in both A and B

A: _____ Overnight Counselor _____ Day Counselor

AND

B. _____ Junior Counselor (17 y/o) _____ Senior Counselor (18 y/o) _____ Unit Leader (20+ y/o)

INSTRUCTOR/COORDINATOR

Please list the **THREE** (3) activities in which you feel most qualified to teach.

1. _____ 2. _____ 3. _____

PROFESSIONAL NARRATIVE

Briefly describe your qualifications for the **instructor** position that you are applying for.

Briefly describe your qualifications for the **cabin counselor** position that you are applying for. Describe any other experience you have had working with children (traditional, disabled or at risk youth) that you feel will assist you in the position.

What age group of children would you prefer working with and why?

REFERENCES:

Please list three people, **NOT RELATED** to you, who can judge your qualifications for the position(s) that you have applied. If you have held a paid position, at least one reference should be from a supervisor. Also, if you have held a camp job, at least one reference must be from a previous camp director, administrator or agency representative. Your completed application and references must be sent directly to:

**Peconic Dunes 4-H Camp
c/o Cornell Cooperative Extension of Suffolk County
423 Griffing Avenue
Riverhead, NY 11901
info@peconicdunes.com**

NAME	TITLE	EMAIL	PHONE

Cornell Cooperative Extension Association Important Notice to Applicants

Disability Accommodation Available for Applicants I understand that if I require an accommodation for a disability so that I may participate in the selection process I am encouraged to contact the Cornell Cooperative Extension (CCE) office where I am applying. I can perform the essential functions of the position for which I am applying with or without accommodation.

Equal Opportunity/Affirmative Action Employer and Educator Cornell Cooperative Extension is an Equal Opportunity/Affirmative Action Employer and Educator. CCE is an organization committed to diversity, inclusiveness and a welcoming environment for its educator, staff, and program participants. Consistent with this commitment, qualified individuals are considered for employment without regard to any legally protected status, including race, color, creed, religion, national origin, age, sex, marital status, disability, sexual orientation, or veteran status. I understand that if I become employed at Cornell Cooperative Extension, it is the CCE's expectation that I will comply with all anti-discrimination laws and support the extension's commitment to diversity and inclusion.

Application Fraud & Misrepresentation I certify that all statements (verbal and written) made on any and all material collected during the hiring process are true, complete and accurate and I understand that misrepresentation or omission of facts called for in the employment application, resume, interview process or other application material may prohibit consideration for employment at CCE and is cause for immediate termination if employed.

Reference and Background Checking Applying for a specific job authorizes Cornell Cooperative Extension to contact any of your schools, your current* and former employers, or other references for the purpose of verifying information and/or obtaining an account of your education, work experience and skills. By applying for a job you agree to hold any and all of your reference sources harmless and free of any liability for releasing such information. Please note that a more extensive background check is part of the employment decision making process and you will need to sign any necessary disclosure and release forms including, but not limited to, an authorization form as part of the hiring process. (* Please note that the point at which your prospective hiring supervisor will contact your employer may vary; however, this is most commonly done on a pre-employment basis usually after the initial interview. This practice is rarely performed on a pre-interview basis. If you have concerns about having your current employer contacted, please communicate those concerns to the person who conducts your initial interview to determine what, if any, alternatives exist.)

May we contact your present employer? Yes No (NOTE: If you are one of the final candidates, it will be necessary to check with your employer for references and employment information.)

Employment Eligibility Verification All offers of employment by Cornell Cooperative Extension are contingent on the provision of satisfactory proof of your identity and legal authority to work in the United States. Prior to or on your first day of employment, you must comply with the requirements of the Immigration and Naturalization Service's Employment Eligibility Verification (I-9 Form).

Offers of Employment Please be advised that Cornell Cooperative Extension will not be bound by offers or conditions of employment other than those made in official offer letters.

I hereby authorize investigation of all statements contained in this and other application documents. I understand that references contacted will not necessarily be limited to those indicated on this application. I authorize my former employers/schools and other individuals to release information relevant to my knowledge, skill, ability, experience, and suitability for the position for which I am applying. I further understand that employment with a Cornell Cooperative Extension association is "at will" in that I, or the employer, may terminate employment at any time or for any reason consistent with applicable state or federal law. By signing the statement, I willfully accept the terms listed above.

Applicant's Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

(Parent/guardian signature required if applicant is 17 years or younger.)