



New Support Staff Application

Camps Leelanau & Kohahna

1653 Port Oneida Road
Maple City, MI 49664

Tel. (231) 334-3808

FAX (231) 334-6238

Email: office@leelanau-kohahna.org

Name: _____ Social Security Number: _____

Current Address: _____

Permanent Address (if different): _____

Phone Number(s): _____

Email Address: _____ Drivers License # and State: _____

Are you 18 years or older? (please circle one) Yes No Birthdate: _____

What position(s) are you applying for? _____

Date you can start: _____ End date (if applicable): _____

Salary desired: _____

Have you ever worked at the camps before? _____ When? _____

EDUCATION	Name & Location of School	Number of Years attended	Did you graduate?	Subjects studied
Lower/Middle School				
High School				
College				
Other				

What types of activities do you participate in? (for example, sports, hobbies, civic activities, etc....)

Please describe any special skills we should know about: _____

(continued on back...)

