



Senior Camp Counsellor Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City Province Postal Code

Phone: _____ Email _____

Camp Areas Applied for (Indicate 2): _____

Camp Sights Applied for (Indicate 2): _____

Are you a citizen of the Canada? YES NO If no, are you authorized to work in Canada.? YES NO

Have you ever worked for TCE Summer Camps? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Do you have a First Aid Certificate? YES NO Please Indicate First Aid Level: _____

Do you have Life Guard Qualifications? YES NO Please Indicate Qualifications: _____

