

# Cornell Cooperative Extension of Cortland County 4-H Camp Owahta Application

*Cornell Cooperative Extension is an affirmative action/equal opportunity employer and educator*

Directions: Type or print, using black ink.

- Sign the completed application.
- Please note that the Employment Record, Education and References sections do not need to be completed if a previously submitted resume provides all of the specific requested information. If there is information requested that is not on your resume, please be sure to provide that information in order to ensure your application materials will be considered fully.
- If you need additional space for information not contained in your resume attach a supplemental sheet.

## GENERAL

Name (Last) (First) (Middle) Date of application

Present address (street, city, state, zip code) Phone no. (daytime) Phone no. (evening)

Address where you may be contacted if different from present address Alternate phone no. Email address

Are you a veteran?  Yes  No U.S. citizen?  Yes  No  
*(If yes, list special education received)* If no, are you legally authorized to work in the U.S.?  Yes  No  
If hired, you will need to provide proof of citizenship or legal right to work in the U.S.

Have you ever been convicted of any criminal offense other than minor traffic violations?  Yes  No  
*If yes, please explain. A criminal conviction will be considered only in relation to the job for which you are applying. Seriousness and nature of the offense, time elapsed, and rehabilitation will be taken into account.*

## POSITION

Position applying for Date available

Where did you learn about this position opening?

- |   |  |
|---|--|
| <input type="checkbox"/> newspaper<br>specify _____<br><input type="checkbox"/> school/career center<br>specify _____<br><input type="checkbox"/> Cornell Cooperative Extension<br>source _____ | <input type="checkbox"/> state employment<br>office _____<br><input type="checkbox"/> Internet<br>specify _____<br><input type="checkbox"/> other<br>specify _____ |
|---|--|

Cornell Cooperative Extension associations provide equal program and employment opportunities. No person shall be denied employment on the basis of any legally prohibited discrimination involving, but not limited to, such factors as race, color, creed, religion, national or ethnic origin, sex, sexual orientation, veteran status, age, or qualified disability.

## EDUCATION

Institution	City and State	Dates attended	Major	Minor	Degree

# EMPLOYMENT RECORD

## Interests

Please select all areas of summer camp interest that apply:

- |  |   |
|--|---|
| <input type="checkbox"/> Kitchen Assistant<br><input type="checkbox"/> Waterfront<br><input type="checkbox"/> Archery<br><input type="checkbox"/> Arts & Crafts<br><input type="checkbox"/> Nature | <input type="checkbox"/> Farm & Garden<br><input type="checkbox"/> Outdoor Recreation<br><input type="checkbox"/> Low Ropes Course<br><input type="checkbox"/> Outdoor Survival Skills<br><input type="checkbox"/> Other: _____ |
|--|---|

Experience relevant to this position (i.e. professional, internships, etc.): \_\_\_\_\_ yrs

Please identify experiences relevant to this position (i.e. lifeguard certification, former camp counselor, etc.):

\_\_\_\_\_ yrs

## Present or last employer

Employer _____	Starting date _____
Street _____	Ending date _____
City _____ State _____	Starting salary _____
Zip code _____ Telephone _____	Final salary _____
Position title _____	Hours worked per week _____ Full time <input type="checkbox"/> Part time <input type="checkbox"/>

Position duties (include number and types of people supervised) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe any promotions or new assignments during this employment \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and job title of last supervisor \_\_\_\_\_

Reason for leaving \_\_\_\_\_

## References List four persons, other than personal friends or relatives, who have knowledge of your work experience and/or education

Name	Title	Mailing Address	Telephone
			home: work:
			home: work:
			home: work:
			home: work:

## 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 Cornell Cooperative Extension (CCE) office where I am applying.

**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. An offer will be contingent upon the successful completion of the reference checking with the current employer.)

**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.

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