

**BOYS & GIRLS CLUBS OF SCHENECTADY
2025 CAMP LOVEJOY
EMPLOYMENT APPLICATION**



Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number(s): _____ Email: _____

School/College: _____ Grade/Year: _____

Major: _____

What position are you applying for? _____

If under 18 years old, do you have working papers? _____ Yes _____ No

Have you been convicted of a felony? _____ Yes _____ No

If yes, explain:

Have you worked for the Boys & Girls Club of Schenectady in the past? _____ Yes _____ No

If Yes, where and when: _____

Describe any specialized training, apprenticeships, skills and extra-curricular activities or any job-related training. (CPR/First Aid)

Please list all experience working or volunteering with youth:

What else would you like us to know about you, experiences, job interest, or special skills?



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OF SCHENECTADY

Camp Program requires a mandatory commitment for the following dates:

Training dates: Saturday, June 21st, 10am-5pm Location: Camp Lovejoy

Monday, June 23rd & Tuesday, June 24th, 4-8 pm Location: Adeline Wright Graham Club

***Monday, June 23rd, 2025 3-4pm.** (Mandatory BGCA training)

Training locations: The Adeline Wright Graham Clubhouse
104 Education Drive, Schenectady, NY 12303

Camp Lovejoy, 3476 Lovejoy Road, Altamont NY 12009

Camp Program: Monday – Friday; June 30th, 2025 - August 15th, 2025

If you are unable to work any of these days, explain:

List three references such as; employers, teachers that are **not friends or relatives**.
References below should be the **same person / persons filling out reference forms**.

	<u>Name</u>	<u>Address</u>	<u>Phone</u>
1.			
2.			
3.			

AGREEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Boys & Girls Clubs of Schenectady.

Signed: _____ Date: _____

Return form to: Boys & Girls Clubs of Schenectady: Camp Program Director
PO Box 466, Schenectady NY 12301