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GENERAL JOB APPLICATION

PERSONAL INFORMATION

FIRST	MI	LAST	EMAIL		
STREET ADDRESS			CITY	STATE	ZIP
MOBILE PHONE					
ARE YOU ENTITLED TO WORK IN THE UNITED STATES?			YES	NO	DATE OF BIRTH:
HOME PHONE					
ARE YOU APPLYING FOR A WORKCAMPER POSITION?			YES	NO	ARE YOU AVAILABLE TO WORK WEEKENDS?
			YES	NO	

EDUCATION

	NAME	LAST YEAR COMPLETED			
HIGH SCHOOL		9	10	11	12
COLLEGE/UNIVERSITY		1	2	3	4
LIST AND APPLICABLE SPECIAL SKILLS, TRAINING OR PROFICIENCIES:					

PRIOR WORK EXPERIENCE

MOST RECENT EMPLOYER:

POSITION / JOB TITLE:

WORK RESPONSIBILITIES:

DATES OF EMPLOYMENT:

NAME OF SUPERVISOR: **PHONE:**

OTHER PREVIOUS EMPLOYER:

POSITION / JOB TITLE:

WORK RESPONSIBILITIES:

DATES OF EMPLOYMENT:

NAME OF SUPERVISOR: **PHONE:**

OTHER PREVIOUS EMPLOYER:

POSITION / JOB TITLE:

WORK RESPONSIBILITIES:

DATES OF EMPLOYMENT:

NAME OF SUPERVISOR: **PHONE:**

REFERENCES

NAME #1: PHONE:
ADDRESS:
CITY: STATE: ZIP:
RELATIONSHIP: YEARS KNOWN:

NAME #2: PHONE:
ADDRESS:
CITY: STATE: ZIP:
RELATIONSHIP: YEARS KNOWN:

NAME #3: PHONE:
ADDRESS:
CITY: STATE: ZIP:
RELATIONSHIP: YEARS KNOWN:

Disclaimer: By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.

DATE SIGNATURE

**ONCE COMPLETED, SAVE TO YOUR DEVICE
& SUBMIT EASILY VIA EMAIL TO:**

CLICK ON BLUE BUTTON ABOVE, IF ON A COMPUTER TO SUBMIT VIA EMAIL TO US!
— OR —

**IF YOU HAVE COMPLETED THIS APPLICATION ON YOUR CELLPHONE,
TAP THE EMAIL ADDRESS AT THE TOP OF THIS FORM TO SUBMIT VIA EMAIL.**
(JUST SIMPLY SELECT YOUR COMPLETED FORM AS AN ATTACHMENT IN THE EMAIL TO US.)

(YOU CAN ALSO PRINT AND MAIL TO THE MAILING ADDRESS LISTED AT THE TOP OF THIS FORM)

FOR OFFICE USE ONLY:

NOTES: