



Wisconsin Youth Company Application

Applicant Name: _____ Today's Date: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Home Phone: _____ Alternate Phone: _____

Over 18 years of age: Yes No E-mail Address: _____

Are you eligible to obtain employment in the United States, if offered this position? Yes No

(If offered the position, you will be required to provide documentation to verify eligibility.)

Position(s) applied for: _____

Part 1 - Education

IMPORTANT: All applications must include a post high school transcript or a high school transcript or diploma if post high school education has not been completed. (Need not be an official copy with application.) Please explain your education background (begin with high school). Attach additional sheets if necessary. Please note, an official transcript may be required if offered employment.

High School:

Name of school: _____ City & State: _____

High School Diploma or G.E.D. obtained: Yes No

Post High School:

Name of school: _____ City & State: _____

Number of Years Attended: _____ Areas of Study: _____

Degree obtained or credits toward degree: _____

Name of School: _____ City & State: _____

Number of Years Attended: _____ Areas of Study: _____

Degree obtained or credits toward degree: _____

Please describe any other training or continuing education credits you have had which might be relevant to the position you are applying for:

Part 2 - Employment History

Past work history: Please provide a full record of all employment (paid and volunteer), explaining any gaps in employment. Describe any positions that directly relate to the position you are applying for (include positions with Wisconsin Youth Company if applicable). Please indicate if any employment was under a different name.

1. Employer: _____ Phone: _____
Address: _____ Zip: _____
Position: _____ Duties: _____

Employment dates: _____ Reason for leaving: _____

May we contact this employer? Yes No

2. Employer: _____ Phone: _____
Address: _____ Zip: _____
Position: _____ Duties: _____

Employment dates: _____ Reason for leaving: _____

May we contact this employer? Yes No

3. Employer: _____ Phone: _____
Address: _____ Zip: _____
Position: _____ Duties: _____

Employment dates: _____ Reason for leaving: _____

May we contact this employer? Yes No

4. Employer: _____ Phone: _____
Address: _____ Zip: _____
Position: _____ Duties: _____

Employment dates: _____ Reason for leaving: _____

May we contact this employer? Yes No

Part 3 – References

Please list the FULL NAME, ADDRESS, CURRENT PHONE NUMBER and EMAIL (if known) of at least two work related references:

Name: _____

Position Title: _____

Company Name: _____

Address: _____

Phone: (____) _____

Alternate Phone: (____) _____

Email: _____

Name: _____

Position Title: _____

Company Name: _____

Address: _____

Phone: (____) _____

Alternate Phone: (____) _____

Email: _____

Name: _____

Position Title: _____

Company Name: _____

Address: _____

Phone: (____) _____

Alternate Phone: (____) _____

Email: _____

Name: _____

Position Title: _____

Company Name: _____

Address: _____

Phone: (____) _____

Alternate Phone: (____) _____

Email: _____

Part 4 – Authorization

All applicants should read this certification carefully before signing:

I certify that I have never been convicted nor do I have any pending charges of child abuse, neglect or crimes against sexual morality involving children.

I understand that if I am offered a position, that offer is contingent on the successful completion of a background check.

I authorize Wisconsin Youth Company personnel to contact the references I have indicated as part of this application.

I will provide written verification of all certifications and relevant training.

I authorize investigation of all statements herein, including any checks of criminal records, and release Wisconsin Youth Company and all others from liability in connection with same. I understand that, if employed, I will be an at-will employee.

I also understand that untrue, misleading, or omitted information relating to this application or in other documents completed by me may result in dismissal, regardless of the time of discovery by Wisconsin Youth Company.

I certify that the information provided in this application is correct to the best of my knowledge.



Applicant Signature

Date

Please mail applications for Dane County to:

Wisconsin Youth Company, Inc.
Attn: Hiring Committee
1201 McKenna Blvd.
Madison, WI 53719
608-276-9782
hiringcommittee@wisconsinyouthcompany.org

Please mail applications for Waukesha County to:

Wisconsin Youth Company, Inc.
Attn: Hiring Committee
1800 Dolphin Dr. Suite 200
Waukesha, WI 53186
262-547-8770
waukesha@wisconsinyouthcompany.org



WYC Summer Staff Application Addendum

Name: _____ Today's Date: _____

Address: _____

Email: _____ Phone: _____

How did you learn about our summer programs (be specific)? _____

Part 1 - Position Interest: Please rank the positions you are applying for in order of preference. (1st, 2nd, etc.)

- Day Camp Director (min. age preferred: 25)
- Assistant Camp Director (min. age requirement: 21)
- Day Camp Lead Group Leader (min. age requirement: 21)
- Day Camp Group Leader (min. age requirement: 18)
- Day Camp Counselor (min. age requirement: 18)
- Middle School U Instructor (min. age requirement: 18)
- Middle School U Lead Youth Leader (min. age requirement: 18)
- Middle School U Youth Leader (min. age requirement: 18)
- Wander Wisconsin Trip Leader (min. age requirement: 21)
- Water Front Supervisor (min. age requirement: 18)

Please check below the locations for which you are applying.

Dane County

- Madison Verona Waunakee
- Middle School U (Based in Madison) Wander Wisconsin (Based in Madison) Immersion Camps (Located in Madison)
- Circus Arts World Language Theater Arts

Waukesha County

- Kettle Moraine

Preference in hiring will be given to applicants who can work the entire camp summer (June 12-August 18) and Encore! week (August 21-25).

Are you available for the entire camp period for the area(s) and position(s) for which you are applying? ___ Yes ___ No

If not, please explain: _____

Are you available between the hours of 6:30 a.m. and 6 p.m. during the summer? ___ Yes ___ No

If not, please explain in detail: _____

Shift Preference: ___ A.M. ___ Mid-day ___ P.M. ___ Anytime

Are you interested in working Encore! week (August 21-25) in Dane County? ___ Yes ___ No

Are you interested in becoming lifeguard certified? ___ Yes ___ No

Do you have access to a vehicle? (Not required for all positions.) ___ Yes ___ No

Please complete if applying for Wander Wisconsin Trip Leader

Are you willing to become an approved driver for Wisconsin Youth Company? (min. age requirement: 21) ___ Yes ___ No

If yes, do you have a valid Driver's License? ___ Yes ___ No

Additional School Year Job Opportunities

Are you interested in our school year employment opportunities? Yes

Are you available to work in our AFTER SCHOOL programs before camp begins? ___ Yes ___ No

Are you available to work any additional weeks in our AFTER SCHOOL programs after camp ends? ___ Yes ___ No

Part 2 - Program Interest

Camp Program Skills: In the following list, put a “**T**” *before* those activities you can organize and teach as an expert; an “**A**” for those activities in which you can assist; and a “**C**” *after* those which you have current certification.

(Please attach certification to application.)

Arts/Crafts

- ceramics/pottery/sculpture
- drawing/painting
- jewelry making
- leather craft
- nature crafts
- paper arts
- photography
- sewing/fiber arts
- _____
- _____

Music

- singing
- instrument (list)
- _____
- _____

Waterfront Activities

- fishing
- kayaking
- swimming/water sports
- _____
- _____

Camping/Outdoor

- campcraft
- general camping
- hiking
- orienteering
- outdoor cooking
- overnights
- _____
- _____

Nature

- animals
- astronomy
- birds
- environmental studies
- farming/ranching/gardening
- flowers
- forestry
- insects
- rocks/minerals
- weather
- _____
- _____

Dance/Drama/Mixed Media

- dance
- juggling
- radio/T.V./video
- storytelling
- theatre
- _____
- _____

Sports/Fitness

- aerobics/exercise
- archery
- baseball/softball
- basketball
- biking
- football
- golf
- hockey
- martial arts
- mountain biking
- roller blading
- skating (ice, roller)
- soccer
- tennis
- track/field
- volleyball
- _____
- _____

Miscellaneous

- classic camp games
- informal games
- community service
- cooking
- cultural/geographic studies
- ethnic activities
- fitness/nutrition
- logic/puzzles/brain teasers
- media/technology
- mystery games
- science
- team building
- cooperative group games
- _____
- _____

What programs and activities are you excited to teach for the following categories?

Arts & Crafts: _____

Sports & Games: _____

Nature & Science: _____

Camping/Outdoors: _____

Performing Arts: _____

Part 3 - Certifications

Please send a copy of certifications with this application.

Please check all that apply:

<input type="checkbox"/> Wilderness First Responder	Expires: _____
<input type="checkbox"/> Lifeguarding	Expires: _____
<input type="checkbox"/> Wilderness Water Safety	Expires: _____
<input type="checkbox"/> Wilderness First Aid	Expires: _____
<input type="checkbox"/> Standard First Aid	Expires: _____
<input type="checkbox"/> Child CPR/AED	Expires: _____
<input type="checkbox"/> Adult CPR/AED	Expires: _____
<input type="checkbox"/> CPR/AED for Lifeguards	Expires: _____
<input type="checkbox"/> CPR/AED for the Professional Rescuer	Expires: _____
<input type="checkbox"/> Registry Certificate Level	Expires: _____
<input type="checkbox"/> Other _____	Expires: _____

Part 4 - References

Included with this summer application addendum are two reference release and reference forms. You are responsible for completing the top half of the reference release forms and mailing these materials to two camp or child work related references. The completed references should be mailed directly to Wisconsin Youth Company in the envelope provided. (Please note: in addition to these forms, your references, including those listed under part 3 of the Wisconsin Youth Company application, may be contacted directly by the hiring committee.)

Part 5 - Application Checklist

- I have completed all sections of the application.
- I have included my most recent transcript with the application.
(Note: only new employees need to submit transcript. Instructors do not need to include a transcript.)
- I have included copies of my current certifications (if applicable).
- New employees only, I have mailed the reference forms to my references.
- I have completed the WYC Application (if applicable)

 Signature _____ Date _____



Affirmative Action Survey

Wisconsin Youth Company is an Equal Opportunity Employer. As required by law, we must record certain information to be made part of our Affirmative Action Program.

In conducting this survey, you are advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resource Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please check the terms which you consider applicable to yourself.

I do not wish to self-identify at this time. (If you checked this box, please skip questions 1-3.)

1. I am

Male

Female

2. I consider myself to be

Hispanic / Latino

White (not Hispanic or Latino)

Black or African American (not Hispanic or Latino)

Native Hawaiian or Pacific Islander (not Hispanic or Latino)

Asian (not Hispanic or Latino)

American Indian or Alaskan Native (not Hispanic or Latino)

Two or More Races (not Hispanic or Latino)

3. I consider myself to

Have a Disability

Not Have a Disability

4. How did you hear about our opening? **Please check one and specify where if applicable:**

I am a current employee

Newspaper ad: _____

Website: _____

Referral By: _____

Other: _____

Office Use Only:

Date Received _____

Position _____
