



Camp Ramah in New England

WINTER OFFICE: 2 Commerce Way, Norwood, MA 02062 (781) 702-5290 FAX (781) 702-5239

SUMMER OFFICE: 39 Bennett Street, Palmer, MA 01069 (413) 283-9771 FAX (413) 283-6661

www.campramahne.org www.ramahblog.org

Elevate your summer!

STAFF APPLICATION FOR RAMAH DAY CAMP OF GREATER WASHINGTON

Please answer all questions as fully and completely as you can. Use reverse side if additional space is needed.

I. PERSONAL INFORMATION

Name _____ Social Security Number _____

Permanent (Home) Address _____

City _____ State _____ Zip code _____

Telephone No. (____) _____ Cellular Phone No. (____) _____

Present Address

(Current mailing address, if different from your permanent address -- ex. college dorm)

City _____ State _____ Zip code _____

Telephone No. (____) _____

E-mail Address _____

Date of Birth _____

Place of Birth _____ Sex: _____

If under 18, name of parent or guardian _____

Telephone No. (____) _____

Address _____

Have you discussed employment at camp with your parent or guardian?

____ Yes

____ No

If yes, has he/she consented to your employment for the coming season?

____ Yes

____ No

I hereby apply to work at Ramah Day Camp of Greater Washington during the upcoming season:

Signature of applicant: _____

Date: _____

Signature of Parent/Guardian if under 18: _____

Date: _____

II. EDUCATIONAL INFORMATION

SECULAR : Name	Location	Dates	Grades/Degree
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High School	_____	_____	_____
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College	_____	_____	_____
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Other	_____	_____	_____
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Present Jewish Education : _____

Previous Jewish Education: _____

III. SYNAGOGUE AFFILIATION

Name of Congregation _____

Rabbi _____

Telephone (____) _____

IV. REFERENCES

Please supply us with THREE (3) written references. These references may be from former employers, rabbis, teachers, etc. They may NOT be written by a member of your family. References can be sent by email to ramahdcdaycamp@gmail.com

V. WORK EXPERIENCE (Tell us a little about any jobs you have held in the past).

VI. PERSONAL INFORMATION

1. Are there any medical conditions or other issues that might impact or affect your ability to participate in or fully perform your job?

☐ Yes

☐ No

Please describe in detail: _____

2. Do you smoke?

☐ Yes

☐ No

3. Have you ever been convicted of a crime?

☐ Yes

☐ No

If yes, please give details: _____

4. Do you have any allergies?

☐ Yes

☐ No

Please list: _____

6. Have you ever attended a Ramah Camp before?

☐ Yes

☐ No

Name of camp: _____ Years: _____

7. List all clubs or activities that you are involved in and what your roles in each of them are: _____

VIII. CAMP SKILLS LIST

Regardless of your position in camp, you have skills and talents that could be an asset to the entire camp. Please mark which skills you possess in the following manner:

1. Place an "L" in front of activities you feel competent in leading.
2. Place an "A" in front of the activities you can assist in leading. (Areas of interest and talent).

Arts and Crafts:

☐ Bead Work
☐ Jewelry Enameling
☐ Mobiles
☐ Painting
☐ Puppetry
☐ Shell Craft
☐ Sketching
☐ Tie Dye
☐ Other _____

☐ Touch Football
☐ Track
☐ Volley Ball
☐ Other _____

Waterfront
☐ Lifeguarding
☐ Swimming
☐ Other _____

Dancing
☐ Ballet
☐ Creative Rhythm
☐ Israeli Folk Dance
☐ Jazz
☐ Modern Dance
☐ Square Dance
☐ Other _____

Sports:

☐ Aerobics
☐ Basketball
☐ Floor Hockey
☐ Frisbee
☐ Karate
☐ La Crosse
☐ Soccer
☐ Softball
☐ Tennis

Theater

☐ Acting
☐ Costuming
☐ Directing
☐ Interpretation
☐ Puppetry
☐ Writing
☐ Other _____

Nature

☐ Bird Watching
☐ Nature Walks
☐ Identifying Plants
☐ Seed Collecting
☐ Identifying Trees
☐ Recycling
☐ Weather Observation
☐ Other _____

Please list any additional skills that you think would be helpful in a day camp setting.

Why do you want to work at Ramah Day Camp of Greater Washington?

Please email completed application to RamahDCdaycamp@gmail.com

Ramah Day Camp

of Greater Washington

STAFF REFERENCE FORM

Applicant's name _____

E-mail address _____

I am applying for the position of _____ at
Ramah Day Camp of Greater Washington and would appreciate your completing this
reference form on my behalf. I hereby waive my right to see this reference form.

Please email this form to RamahDCdaycamp@gmail.com or

Thank you very much for your assistance.

Signature of Applicant

NAME _____ printed signature _____

RELATIONSHIP TO APPLICANT _____

ORGANIZATION _____ POSITION _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER (____) _____

1. Describe the applicant's leadership ability, maturity and level of responsibility.

2. What is his/her ability to work with children and be an appropriate role model for them?

UNDER THE EDUCATIONAL SUPERVISION OF THE JEWISH THEOLOGICAL
SEMINARY OF AMERICA

3. Describe the applicant's pattern of Jewish religious commitment and involvement in Jewish life.

4. Describe the applicant's major strengths and/or weaknesses not addressed above.

5. Please include any additional comments you feel are appropriate.
