



Administrative Camp Director:
Alisa Zitofsky
Wee Friends Camp & School Director
Linda Zryb



Forever Friends

WEE FRIENDS/CAMP ICONIC STAFF APPLICATION

NAME _____ DATE _____
ADDRESS _____ PHONE _____
_____ CELL _____
EMAIL ADDRESS _____

SOC. SEC. # _____ DATE OF BIRTH _____

REFERRED BY _____

EDUCATION BACKGROUND:

LIST ALL DEGREES AND/OR CERTIFICATES:

EDUCATIONAL/CAMP RELATED EXPERIENCE:

INTERESTS/HOBBIES:

REFERENCES: INCLUDE NAME, TITLE, PHONE NUMBER

PERSONAL:

1. _____
2. _____

PROFESSIONAL:

1. _____
2. _____