

# Camp Winnekeag

"The Camp That Cares"



## Five-Year Employment History

Please complete this form thoroughly. Incomplete forms are unacceptable. Be sure to include the name and phone number of each former employer so they can be contacted. Please start with your most recent employer and work your way backward over the past five years.

**Name of Applicant** \_\_\_\_\_

Dates of Employment	Name & Address of Place of Employment	Name & Phone of Supervisor

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