

APPLICATION FOR EMPLOYMENT

SOQUEL CAMP MEETING

July 17-26, 2025

INSTRUCTIONS:

Complete both sides of the application and return to:

Human Resources
Central California Conference
2820 Willow Ave
Clovis, CA 93612
hr@cccsda.org

No lodging will be
provided to
employees this
year.

EMPLOYMENT QUALIFICATIONS:

1. Must have a current food handler's permit for Snack Bar employment.
(Must provide copy prior to camp meeting)
2. Must be 16 years of age or more by July 17, 2025.
3. Provide work permit if under 18 years of age.
4. Live with parent on grounds if under 21 years of age.
5. Provide proof of ability to be employed (Form I-9) if hired.
6. Dress and behave in a modest, conservative manner.

Name _____ Date _____

Address _____
Street City State Zip

Telephone _____

E-mail Address (required): _____

Church Membership (required): _____

- | | | |
|---|------------------------------|-----------------------------|
| 1. Are you prevented from lawfully becoming employed in this Country because of visa or immigration status? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Are you 18 or more years of age? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. If no, will you be 16 years of age by July 17, 2025 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Do you currently work for another SDA entity in the Central California Conference? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
- If yes, where? _____

Previous camp meeting work experience Yes No Area _____ Year(s) _____

Employment may be available in the following departments:

(Please check the box(es) for the departments you wish to apply for)

Parking Snack Bar/Cafeteria

REFERENCES

Give name, address and telephone number of the following individuals who may be contacted for a written recommendation.

1. Pastor

Name _____ Telephone No. (____) _____

Address _____
Street City State Zip

2. Other

Name _____ Telephone No. (____) _____

Address _____
Street City State Zip

STATEMENT OF APPLICANT

I have read the employment qualifications and certify that I am eligible to be employed, and that the answers given are true and complete to the best of my knowledge. In the event of employment, I understand that I will be required to abide by all camp meeting and employment regulations.

Date _____ Signature of Applicant _____

STATEMENT OF PARENT (If applicant is less than 18 years of age)

I have read the employment qualifications and answers provided by the applicant and certify that:

1. The applicant meets the employment qualifications.
2. Answers provided on the application are true and complete to the best of my knowledge.
3. I will be living on the grounds during the entire camp meeting session.
4. I will be responsible for the applicant during camp meeting session.

Date _____ Signature of Parent _____

For Supervisor Use Only

- | | |
|---|---|
| <input type="checkbox"/> Application Accepted | <input type="checkbox"/> Work Permit (if under 18 years of age) |
| <input type="checkbox"/> Personnel Action Request | <input type="checkbox"/> Background Check (if 18 years of age or older) |
| <input type="checkbox"/> Food Handler's Permit | |

Approved by _____