



LAKE LUCILLE CAMPGROUND HOST APPLICATION

CITY OF WASILLA

Applicant Information

(If applying as a host couple, each individual must complete a separate application)

Full Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Cell Phone: _____ Best Time to Call: _____

Are you a citizen of the United States? YES NO You must be an United States citizen to volunteer

Date of Birth: _____ Driver's License No. & State: _____

Have you ever been convicted of a felony? YES NO If Yes, please explain: _____

Dates you are available: _____ 4 week minimum required

Do you have an RV or trailer? _____ Willing to work weekends? _____

Outdoor Interests, hobbies or special training skills: _____

Are you on medication? _____

Has any medical provider limited the scope of your physical activities? If yes, please describe _____

Employment status: Full Time: _____ Part Time: _____ Unemployed: _____ Retired: _____

Occupation: _____

Education

High School: _____

College: _____

Field experience: _____

Other volunteer experience: _____

References or Most Recent Employers

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

May we contact your references & employers? _____

Signature: _____ Date: _____

*A background check may be performed on your application.
Please use additional sheets or include a resume if needed.*

**Return completed application to:
Purchasing & Contracting Officer**

Phone: 907.373.9047 Email: adwyer@ci.wasilla.ak.us Fax: 907.373.9085