

Campground Host Application

Name:
Address:
City: State: Zip:
Daytime Phone: () Email:
How many years have you been a camper:
Have you been a Campground Host before? Yes: No: What year(s):
At what state park(s):
Who was your most recent volunteer supervisor?
Briefly describe your camping experience:
What do you enjoy most about camping?
What would be your strength as a Campground Host?
List state parks in which you have most recently camped:
List any qualifications, skills or interests applicable to camping:
Educational level achieved:

Briefly descr	ibe past and present paid employme	ent:	
List two pers	onal references:		
Name		Phone number	
Name		Phone number	
Availability:	First option dates:		
	Second option dates:		
If selected, w	what kind of camping unit will you us	e?	
Campers wh	o will accompany you (limit six inclu	ding Host). Please list nan	nes and relation:
1		4	
		5	
		6. Applicant	
	Applicant's signature		Date



Ohio Department of Natural Resources Division of Parks and Recreation Volunteers-in-Parks is an Equal Opportunity Program - M/F/H