

## ROCK ISLAND COUNTY FOREST PRESERVE DISTRICT CAMPGROUND HOST APPLICATION

Name of Applicant: First: \_\_\_\_\_ Last: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Cell \_\_\_\_\_ Email Address: \_\_\_\_\_

List any additional names you have used or been know by: \_\_\_\_\_

Do you have the legal right to work in the US? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide the following  
information: \_\_\_\_\_ Felony \_\_\_\_\_ Misdemeanor, Name of crime(s)/conviction(s) \_\_\_\_\_

Date of conviction(s) \_\_\_\_\_

Name and location of Court(s) which convicted \_\_\_\_\_

Time you can serve as a campground host: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Do you have a valid driver's license Yes \_\_\_\_\_ No \_\_\_\_\_ License # \_\_\_\_\_ State Issued \_\_\_\_\_

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Name of Co-Applicant: First: \_\_\_\_\_ Last: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Cell \_\_\_\_\_ Email Address: \_\_\_\_\_

List any additional names you have used or been know by: \_\_\_\_\_

Do you have the legal right to work in the US? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide the following  
information: \_\_\_\_\_ Felony \_\_\_\_\_ Misdemeanor, Name of crime(s)/conviction(s) \_\_\_\_\_

Date of conviction(s) \_\_\_\_\_

Name and location of Court(s) which convicted \_\_\_\_\_

Time you can serve as a campground co-host: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Do you have a valid driver's license Yes \_\_\_\_\_ No \_\_\_\_\_ License # \_\_\_\_\_ State Issued \_\_\_\_\_

Please list other members of your family who will reside full-time at the campsite:

1. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

2. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

3. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

4. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

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Do you have any pets that will reside with you? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what? Dog,

Yellow Lab named Sunshine for example. \_\_\_\_\_

\_\_\_\_\_

Can you provide documentation that your pet has all Licenses and current vaccinations? Yes \_\_\_\_ No \_\_\_\_

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Interest, Skills, Hobbies: \_\_\_\_\_

\_\_\_\_\_

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Please list all previous sites where applicant and co-applicant have served as a campground host/volunteer or as an employee: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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If selected, what type of camping unit will you use? \_\_\_\_\_

Site Preference: Illiniwek # \_\_\_\_\_ Loud Thunder # \_\_\_\_\_

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Please list three (3) references:

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

If selected, please list name of emergency contact not living with you:

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Applicants Statement-Please read before signing.**

**In making this application for employment, I understand Rock Island County Forest Preserve District may conduct investigations including verifications of prior employment history and education. I hereby certify that all statements in this application are true. I understand any false statements, omissions or misrepresentation will result in the offer of employment to be rescinded or employment to be terminated. I understand that a criminal history check may be obtained prior to my appointment as a campground host.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Date

**Return this form to:  
Rock Island County Forest Preserve District  
c/o Forest Preserve Director  
19406 Loud Thunder Road  
Illinois City, IL 61259.**