

**PRE-EMPLOYMENT SCREENING**  
HOPEWELL CAMP AND CONFERENCE CENTER  
24 CR 231 OXFORD, MS 38655  
PH 662-234-2254 FAX 662-234-4150  
TOLL FREE: 866-HOPEWELL (866-467-3935)  
E-MAIL: allyson@camphopewell.com

Name: First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

SS# \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Current Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail \_\_\_\_\_

School Level \_\_\_\_\_

I was referred to Camp Hopewell by: \_\_\_\_\_

I am interested in employment at Camp Hopewell. All information provided on this screening is true to the best of my knowledge. I understand that this is only a Pre-Employment Screening, and I will be contacted by Camp Hopewell to receive a full employment application packet.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this form to:**  
**Allyson Ashmore**  
**Program Director**  
**24 CR 231**  
**Oxford, MS 38655**

**Or Fax to 662-234-4150 or email to allyson@camphopewell.com**