

Camper Host Program

Camper Host Application

Application for the Anchorage School District (ASD) Camper Host Program. Please complete the application in its entirety. To guarantee a site is reserved, promptly return all required forms, documentation, and photos. Complete all fields in legible print. Applications are accepted via mail or email. Attention mailed copies to Lindsay Kubosh, Office of Emergency Management: 5530 E. Northern Lights Blvd., Anchorage, AK 99504. Email completed application to: Kubosh_Lindsay@asdk12.org. For questions, please email or call (907) 742-4134.

Are you a returnir	ng Camper Host?	Yes (Ye	ar) No		
Legal Name:	(First)	(Middle)	(Last)	Date of Birth:	
Legal Name:				Date of Birth:	
	(First)	(Middle)	(Last)		
Mailing Address:					
Lindii / taaress					
Home Telephone:	·		_ Cell Number:_		
How Many in Your Party:			Length of Stay:		
			(available May 23r	ed, 2025-August 10h, 2025)	
(Note: Schools located o	ence (List Three):_ n military bases are not pe	ermissible camper site	es. For a list of site location	ons, <u>click here</u>)	
Drivers License #.		_ Expiration t	Jate	State:	
Drivers License #:		_ Expiration [Date:	State:	
RV Make/Model:		Power Requir	Power Requirements:		
(Note: Include a clear ph	oto of your vehicles, RV, e	tc.)			
RV License #:			State:		
Vehicle License #:			State:		
Vehicle License #:			State:		



Employment Status: Full-time Part-time Unemployed Retired
Occupation:
References: (Note: Include addresses, telephone numbers, and dates of most recent employment)
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2.
Have you ever been convicted of a misdemeanor or felony? Yes No No If yes, explain: (Note: The Anchorage School District will conduct background checks on all applicants)
Volunteer Experience:
Other Pertinent Experience:
The Camper Host Program requires hosts to periodically inspect the site's premises to prevent vandalism and report suspicious activity. Are you willing to perform these duties? Yes No If no, what accommodations can be made?
First Aid Certified? Yes No Expiration Date: CPR Certified? Yes No Expiration Date:

How did you discover the Ca	amper Host Progran	m?			
Signature		Date	Date		
Signature		Date	Date		
(Note: To be completed by ASD Campe	er Host Program; Do not w	rite below this line)			
ASD Background Check?	Staff:		Date Processed:		
FBI Background Check?	HR Verified:		Date Processed:		
Fingerprints?	Receipt Date:		Date Processed:		
Water Key Deposit?	Staff:		Date Processed:		
Gate Key Deposit?	Staff:		Date Processed:		