

**YOUTH CAMP 20\_\_  
CAMP STAFF APPLICATION**

**MAIL TO:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 By \_\_\_\_\_ or as soon as possible

**Dates Received CAMP USE ONLY**  
 \_\_\_\_\_ Application  
 \_\_\_\_\_ Reference 1  
 \_\_\_\_\_ Reference 2

Please print plainly - using dark ink.

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS – Print plainly \_\_\_\_\_

LOCAL CONGREGATION \_\_\_\_\_ CHURCH PHONE \_\_\_\_\_

Baptized believer? Yes  No  How long have you been a Christian? \_\_\_\_\_

Church Address \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_

**By Board policy,** Bible teachers, counselors and any others who have a direct impact on the spiritual life of the camp session are to be baptized believers and members in good standing of their local Church of Christ.

**POSITION(S) DESIRED:** (Please circle duties you feel capable of doing; you may rank them)

- |                        |                                       |                         |
|------------------------|---------------------------------------|-------------------------|
| Bible Teacher/Helper   | Cabin Counselor                       | Crafts Teacher/Helper   |
| Lifeguard              | Kitchen Staff (head cook/cook/helper) | Dorm Parent             |
| Nature Teacher/Helper  | Maintenance                           | Spiritual Life Director |
| Nurse/First Aide (CPR) | Recreation Director                   | Other (Please List)     |

**REFERENCES:** Please PRINT neatly the names of the two people to whom you will give your reference letter forms. Please include their phone number. Ask them before listing here. Reference letters must be returned or your application is not complete.

1. \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

2. . \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

**PLEASE CIRCLE ALL SESSIONS YOU ARE APPLYING FOR:**

**Please be aware that the Board considers staff-camper romantic relationships to be inappropriate at camp.**

**GIRLS** (Gr 7-12) June \_\_\_\_\_

**BEGINNER** (7-9 Yr) 1.(June\_\_\_\_) 2.(June\_\_\_\_) **JUNIOR** (Gr 3-6) 1.(June\_\_\_\_) 2.(June\_\_\_\_)

**INTERMEDIATE** (Gr 6-9) 1.(July\_\_\_\_) 2.(July\_\_\_\_) **SENIOR** (Gr 9-12) 1.(July\_\_\_\_) 2.(July\_\_\_\_)

I understand that \_\_\_\_\_ is a non-profit organization that seeks to provide Christian study and recreation. As a staff member, I am expected to set a good example to fellow staff and campers. I donate my time and effort and I understand that \_\_\_\_\_ will furnish my room and board at the campground during the session(s) I work. In the event of illness or injury to me, my medical insurance will be used first, and, if necessary, the camp's insurance will be secondary.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**If camper age,** list sessions you plan to attend as a camper: \_\_\_\_\_

**If adult,** list below name, age and gender of any non-staff family members who will need to accompany you. (Staff housing is limited; we will need to share apartments) \*Any children with you who are of that session age range must be registered as campers. Please register them early to ensure their place.

**SPECIAL SKILLS OR ABILITIES and QUALIFYING EXPERIENCE:** (Use separate sheet or back)

**Do you want: Camp Membership Information?** Yes No **Camp Newsletter?** Yes No **By Email?** Yes No

**YOUTH CAMP 20\_\_**

**REFERENCE LETTER**

Date received \_\_\_\_\_

**Staff Applicant: Please complete this section:**

Your Name \_\_\_\_\_

Age(s) of children you will be working with \_\_\_\_\_

Position(s) applying for \_\_\_\_\_

**Dear Reference:**

The above named person is applying to work for our Christian youth camp. They have chosen you as a personal reference because of your relationship with them through church or the camp. \_\_\_\_\_ Youth Camp prides itself on the people who work with our youth. Please help us continue this tradition by filling out the following form. Mail it back to \_\_\_\_\_ in the accompanying envelope. We appreciate your time and thoughts.

>How long and in what ways have you known the applicant? \_\_\_\_\_

\_\_\_\_\_

>In what specific ways have you seen the applicant working with youth? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

>What gifts, talents, and abilities have you seen that the applicant can bring to the benefit of the camp? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

>Are there any challenges that you believe the applicant may face within the camp environment? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

>Do you believe the applicant shows the emotional and spiritual maturity to handle the position(s) desired? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reference's Name \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Reference's Signature \_\_\_\_\_

Again, thank you for your time and insights.  
\_\_\_\_\_ Board-Programs Committee

Please mail completed form as soon as possible to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date received \_\_\_\_\_

**Staff Applicant: Please complete this section:**

<p>Your Name _____</p> <p>Age(s) of children you will be working with _____</p> <p>Position(s) applying for _____</p>
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\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reference's Name \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Reference's Signature \_\_\_\_\_

Again, thank you for your time and insights.  
\_\_\_\_\_ Board-Programs Committee

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