



Sponsored by Grass Roots Ministries, Inc.

STAFF EMPLOYMENT APPLICATION

Date of Application: _____

GENERAL INFORMATION

Name: *(Last, First Middle)*: _____

Social Security Number: _____ Birth Date: _____ Current Age: _____

Occupation: _____

PRESENT ADDRESS

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____

Email: _____

PERMANENT ADDRESS

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Other Contact: _____

MARITAL STATUS

Single ___ Engaged ___ Married ___ Widowed ___ Divorced/Separated ___

If married give following information about spouse:

Name _____ Age _____ Date of Marriage _____

Name / Ages of Children _____

CHURCH INFORMATION

Church: _____ Pastor: _____

City: _____ State: _____ Zip: _____ Phone: _____



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HISTORY

Have you ever been charged of a crime or arrested? _____

If yes, explain _____

Have you ever been accused of a sexual misconduct? _____

If yes, explain _____

HEALTH

Excellent____ Good____ Fair____ Poor____

Do you have health Insurance? _____ If yes, give company and policy number:

_____ # _____

Describe any physical limitation that may affect your ability to fully participate in camp activities:

EDUCATION

High School: _____ Year _____

College: _____ Year _____

Other: _____ Year _____

Areas of study or degree _____

EXPERIENCE:

List any previous camping experience: _____

Camp _____ Location _____ Years _____

What experience have you had in working with children or youth:

Have you ever applied for a position working with youth and were refused? _____

If yes, explain: _____

List any other activities that would equip you to serve as camp staff:

List any waterfront, first aid, craft, ropes course certification you hold and expiration:



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SKILLS

Check areas in which you have been trained or could teach/facilitate:

- | | | | | |
|--|--|--------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Outdoor Cooking | <input type="checkbox"/> Swimming | <input type="checkbox"/> Soccer | <input type="checkbox"/> Lifesaving | <input type="checkbox"/> Archery |
| <input type="checkbox"/> Leading Music | <input type="checkbox"/> Fishing | <input type="checkbox"/> Volleyball | <input type="checkbox"/> Guitar | <input type="checkbox"/> Drums |
| <input type="checkbox"/> Table Tennis | <input type="checkbox"/> First Aid | <input type="checkbox"/> Devotionals | <input type="checkbox"/> Softball | <input type="checkbox"/> Pottery |
| <input type="checkbox"/> Nature Hiking | <input type="checkbox"/> Groups | <input type="checkbox"/> Astronomy | <input type="checkbox"/> Weaving | <input type="checkbox"/> Bird Study |
| <input type="checkbox"/> Outdoor Education | <input type="checkbox"/> Leather Craft | <input type="checkbox"/> Singing | <input type="checkbox"/> Canoeing | <input type="checkbox"/> other |

WHICH CAMPS ARE YOU APPLYING TO WORK AT? (Check all that apply)

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Adventure Camp | <input type="checkbox"/> Basics I |
| <input type="checkbox"/> Day Camp | <input type="checkbox"/> Basics II |

POSITION(S) APPLIED FOR: (Check all that apply)

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Weekly Camp Director | <input type="checkbox"/> Music Leader | <input type="checkbox"/> Activities/Rec Director | <input type="checkbox"/> Nature Leader |
| <input type="checkbox"/> Craft Instructor | <input type="checkbox"/> Sr. Counselor | <input type="checkbox"/> Jr. Counselor | <input type="checkbox"/> Registered Nurse |
| <input type="checkbox"/> Head Cook | <input type="checkbox"/> Kitchen Assistant | <input type="checkbox"/> AAA (All Around Assnt) | <input type="checkbox"/> Lifeguard |



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SPIRITUAL LIFE

Please tell us about your relationship with Christ.

Please describe what prayer means to you.

Please describe what the bible means to you.

Tell us about your fellowship with other Christians.

Describe any other ministries you have recently been involved with.

Why do you want to work at Camp Buckeye?



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REFERENCES: Please use coworkers, supervisors, pastors and one friend. Do not use relatives

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

AFFIRMATION

The summer camping program at Camp Buckeye is an extension of Grass Roots Ministries, Inc. The Camp seeks to proclaim, in word and deed, the gospel of the love of God through Jesus Christ. The implication of this philosophy is that all staff persons will seek to pattern their lives and relationships after that of Jesus Christ. They need to be open, loving and growing Christians.

Because we wish to make witness to a wholesome, fulfilling and joyous camping experience for everyone, we do not allow the use of alcohol, tobacco or illegal drugs at Camp Buckeye. Persons who cannot subscribe to such a position will not be considered for any employment.

I understand & agree to the above.

Signature _____ Date _____

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any Information (including opinions) that they may have regarding my character and fitness for children and youth work. In consideration of the receipt and evaluation of this application by Camp Buckeye, I hereby release any individual, Church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive the right that I may have to inspect any information provided about me by any person or organization identified by me in this Application.

I also authorize Camp Buckeye to collect information from any source needed to evaluate my application and the appropriateness of my employment.

Signature _____ Date _____