



CAMP STAFF APPLICATION 2016

Please type or print clearly and fill out the application completely.
Return to: Rev. Elizabeth Tester 413 S 2nd St, Watertown, WI 53094
 Phone: 920-261-1150 saint413paul.rector@gmail.com FORM DUE by April 15, 2016

If you wish to attach a resume to help fill in this page of the application, please feel free to do so and mark where we should reference your resume.

Date: _____

Name: _____

Email: _____ T-shirt Size (Adult) S M L XL XXL

Current Address: _____

City, State, Zip: _____

Phone: _____ Cell phone: _____

Permanent Address: _____

City, State, Zip: _____

I am Applying for the position of: (check all that apply)
 Counselor Counselor-in-Training (12th grade high school students)

Can you meet or exceed the minimum age requirements for this position?

Can you perform the essential functions of the job for which you have applied, with or without reasonable accommodation? Yes No

If you are hired, would you desire/need housing for any person(s) other than yourself? Yes No

Are you either: (1) a U.S. citizen or, if not, (2) do you currently have lawful employment authorization which permits you to work for Camp Webb without Camp Webb having to take any action, either upon employment, or at any date in the future, to ensure or assist you in maintaining lawful employment authorization to work for the Company? Yes No

If your answer was "Yes," answer the following question:
 Are you a student on a temporary visa? Yes No

Proof of authorization to work will be required if you are employed by Camp Webb.

EDUCATION HISTORY

	Name and Location	Did you Graduate	Subjects Studied or Major
High School			
College			
Other Schooling			

PAST WORK HISTORY

Please provide a full record of all employment – paid and volunteer – and explain any gaps in employment. Include any positions on camp staff. Use a separate sheet, if necessary.

Dates	Employer/Supervisor	Address & Phone	Nature of work	Reason for Leaving

OTHER CAMPING, YOUTH MINISTRY, EDUCATION/CHILDCARE OR LEADERSHIP EXPERIENCE

Name of Camp/Organization/Church	Type of Participant (camper, staff, etc.)	Dates

SKILLS AND CERTIFICATIONS

In the following list, please fill in the boxes with:

“T” = I can organize and teach

“C” = I am certified - please attach a copy of certification *

*If you are getting certified, please note the date you will be certified

- | | | | |
|--|---|---|--|
| <p>Arts/Crafts</p> <input type="checkbox"/> drawing/painting
<input type="checkbox"/> other _____ | <p>Music</p> <input type="checkbox"/> instrument(s) (list) _____
<input type="checkbox"/> singing
<input type="checkbox"/> other _____ | <input type="checkbox"/> fishing
<input type="checkbox"/> football
<input type="checkbox"/> Frisbee golf
<input type="checkbox"/> games
<input type="checkbox"/> hiking
<input type="checkbox"/> soccer
<input type="checkbox"/> volleyball
<input type="checkbox"/> other _____ | <p>Miscellaneous</p> <input type="checkbox"/> community service/outreach
<input type="checkbox"/> drama
<input type="checkbox"/> fire building
<input type="checkbox"/> foreign language
<input type="checkbox"/> leadership development
<input type="checkbox"/> radio/TV/video
<input type="checkbox"/> sign-language
<input type="checkbox"/> storytelling
<input type="checkbox"/> team building
<input type="checkbox"/> website/computer
<input type="checkbox"/> other _____ |
| <p>Church Related</p> <input type="checkbox"/> bible study
<input type="checkbox"/> religious studies
<input type="checkbox"/> worship services | <p>Nature</p> <input type="checkbox"/> animals/animal care
<input type="checkbox"/> environmental studies
<input type="checkbox"/> other _____ | <p>Waterfront Activities</p> <input type="checkbox"/> canoeing
<input type="checkbox"/> kayaking
<input type="checkbox"/> swimming
<input type="checkbox"/> other _____ | |
| <p>Health and Safety</p> <input type="checkbox"/> CPR/First Aid
<input type="checkbox"/> lifeguarding
<input type="checkbox"/> nursing | <p>Sports/Fitness</p> <input type="checkbox"/> baseball/softball
<input type="checkbox"/> basketball
<input type="checkbox"/> ropes/challenge course | | |

BIOGRAPHICAL INFORMATION

Please answer TWO of the following questions on a separate sheet of paper to let us know a little more about yourself.

- 1) Describe any activities that you are involved in that might be relevant to the position you seek.
- 2) Please list any groups that you belong to such as; small groups, teams, volunteer organizations, etc.?
- 3) What contributions do you think you can make at camp?
- 4) What are your goals for the position for which you are applying?
- 5) Write a brief biographical sketch which might have a bearing on the position for which you are applying.
- 6) In your experience, how has camp or related activities been an important part of your life? Tell us why it was so important to you.
- 7) What contributions do you think camp can make to youth and young adults?

SPIRITUAL LIFE

Camp Webb is a spiritually centered camping program sponsored by the Episcopal Church. Please offer a one page explanation of your own spiritual life. Are you willing to suspend your own beliefs to uphold the liturgy, worship, and spirituality of the Episcopal Church if necessary?

CRIMINAL RECORD, CHARGES AND COMPLAINTS

Please mark your answers in the boxes and use a separate sheet of paper for your answers if necessary.

- 1) Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor? If so please explain: Yes No
- 2) Has any charge, claim, or complaint ever been made that you engaged in inappropriate sexual behavior? If so, give details: Yes No
- 3) Is there any fact or circumstance about you or your background that would raise a question as to the advisability of entrusting you with the supervision, guidance, and care of young people? Yes No
- 4) List all convictions and pleas of nolo contendere or no contest for any offense or violation (including felony, misdemeanor or municipal ordinance), other than minor traffic violations, and list all pending criminal charges.

(Note: No applicant will be denied a position because of a pending criminal charge or conviction for (or plea of nolo contendere or no contest to) an offense or violation (whether criminal or otherwise) which Camp Webb determines is not substantially related to the circumstances of the job(s) being sought.)

Camp Webb is committed to the safety and well-being of all people. Before being employed at Camp Webb, we will run a complete background check. You will be sent a form that you will need to IMMEDIATELY and COMPLETELY fill out and return to the Diocese of Milwaukee.

AUTHORIZATION FOR REFERENCE CHECK

I am applying for employment with CAMP WEBB. I hereby authorize any and all persons (including any and all employers with whom I have been employed, schools that I have attended and organizations with which I have been connected) to release any and all information they have about me to CAMP WEBB. This includes all of my personnel records with prior employers and any information about my performance during my employment with them and also includes all of my transcripts from any schools that I have attended. I hereby release all persons, companies, schools and organizations (and all persons connected with them) who provide such information to CAMP WEBB from any and all liability for any damage for giving this information.

This Authorization shall remain in effect for a period of one (1) year from the date on which I sign it. A photocopy of this Authorization may be used by CAMP WEBB and shall be as effective as the original.

Applicant's Name [please print] _____

Applicant's Signature _____ Date _____

REFERENCES

Applicants must be interviewed before they will be hired. Two written references must be received prior to hiring. References *may not* be family members.

1) Name: _____ Email: _____

Address: _____

City, State, Zip: _____

Phone: _____ Cell phone: _____

How do you know this reference? _____

1) Name: _____ Email: _____
Address: _____
City, State, Zip: _____
Phone: _____ Cell phone: _____
How do you know this reference? _____

READ, UNDERSTAND, SIGN AND DATE IF YOU AGREE

I certify that the facts set forth in this application are true, correct and complete without misrepresentations or omissions of any kind whatsoever. I authorize investigation of the statements I have made herein. I understand that if any of the information on this application form is discovered to be incorrect, false or misleading or if there are any misrepresentations or omissions of any kind whatsoever, then CAMP WEBB may deny me employment or terminate my employment, and I agree that CAMP WEBB shall not be liable in any respect if it does so.

I hereby release from any and all liability all representatives of CAMP WEBB for their acts performed in connection with evaluating my application, background, credentials and qualifications. I hereby further authorize any party (including the companies, schools and organizations listed in this application form) to release any information they may have about me to CAMP WEBB. I also release all persons, companies, schools and organizations (and all persons connected with them) who provide such information to CAMP WEBB from any and all liability for any damage for giving this information.

I understand that if I am employed by CAMP WEBB, any such employment is not binding on either party for any specific period of time. I further understand that no representative of CAMP WEBB, other than the **Camp Director**, has any authority to enter into any agreement for employment for any specified period of time. Any such agreement must be in writing and signed by the **Camp Director**. I understand that any other written or oral statement to the contrary, even if made by a supervisor, manager or officer of CAMP WEBB is invalid and should not be relied on by me. I understand that if employed I will be an employee-at-will and that either CAMP WEBB or I may terminate that employment relationship at any time, for any reason, with or without notice.

(Signature of Applicant) _____ (Date) _____