

FOR OFFICE USE ONLY

Applicant Name _____

Date Application Received _____ Type Position _____

Interviewed by: _____ Date Interviewed _____

CAMP IN THE COMMUNITY RETURNING SUMMER STAFF APPLICATION

Holston Conference Camp and Retreat Ministries, Inc.

2020 Summer Camp Positions Available:

Site Coordinator: _____ **Head Counselor:** _____ **Counselor:** _____

Type of position for which you are applying: (circle) Volunteer Hired

I. GENERAL INFORMATION:

Full Name _____

Birth Date (if under 21) _____ Gender _____

Permanent Address _____ Phone (home) _____

_____ Phone (work) _____

Current Mailing Address _____ Phone (cell) _____

_____ Email _____

For students, if phone is different in May: _____

List Counties and States lived in since age 16: _____

II. EDUCATION (INCLUDE SCHOOLS ATTENDED OR ATTENDING):

High School _____ Year of Graduation _____

College _____ Year of Graduation _____

Degree Expected or Granted _____ Post-Grad. Schooling _____

Are you presently enrolled in school? _____ Where? _____

Indicate your present grade level _____

III. PREVIOUS EMPLOYMENT AT A HOLSTON CONFERENCE CAMP:

Position	Campsite	Dates
----------	----------	-------

IV. PRESENT AND/OR PREVIOUS EMPLOYMENT (LIST LAST THREE POSITIONS):

Dates	Employer	Address/Phone	Nature of Work
-------	----------	---------------	----------------

V. REFERENCES:

List three adults (at least two persons not related to you) who have definite knowledge of your character and your qualifications for the position for which you are applying. At least one should have definite knowledge of your experience supervising children and/or youth. **PLEASE GIVE COMPLETE ADDRESS, INCLUDING CITY AND ZIP CODE.** References will be contacted. Please write clearly, use separate sheet if necessary.

Name	Full Address	Relationship to Applicant
------	--------------	---------------------------

1 _____

Phone _____ Email _____

2 _____

Phone _____ Email _____

3 _____

Phone _____ Email _____

VI. RELIGIOUS ACTIVITIES, INTERESTS, AND EXPERIENCE?

Where is your church membership? _____

List any local church involvement (leadership or teaching, etc.): _____

Name, Address and Phone # of a pastor who can reference for you: _____

Describe the current status of your personal discipleship as a follower of Jesus Christ:

VII. SCHOOL AND OTHER LEADERSHIP:

School or related groups to which you belong: _____

Offices Held: _____

VIII. CHILD CARE EXPERIENCE:

List and describe any experience you have had caring for or supervising children and/or youth:

- X. REFLECTIVE ESSAY:** (1) Why do you want to return to summer camp? (2) What are your goals for the summer? (3) How have you grown since last summer? (4) Describe a situation where you have worked with, or have been in community with people who are different from you:

XI. SCREENING

Do you have any criminal convictions for child abuse or sex-related crimes? _____ If yes, please explain.

Have you read and signed the Volunteer and Hired Staff Disclosure Form? _____

Have you read and signed the Policies Specific to Summer Camp Community? _____

Do you have a Social Networking Website (Facebook, Instagram, Twitter, etc.)? _____ If so, please provide your URL address so that your site(s) can be included in the screening process. _____

A "friend" request will be sent to you by a full-time staff member.

XII. PERSONAL AVAILABILITY

Prior to a personal interview, each applicant must submit a completed:

Summer Camp Staff Returning Application

Volunteer and Hired Staff Disclosure Form (RE Background Check)

Policies Specific to Summer Camp Community (signed to indicate knowledge of content)

When and where are you available for an interview? _____

If accepted for employment, what are the dates you could work? From _____ To _____

If accepted for volunteer service, what week(s) do you wish to volunteer? _____

Are there any times that you know you need to be absent from work? _____ If so, please give details: _____

XIII. CONDITIONS OF EMPLOYMENT:

The following must be completed with a record on file:

A Criminal Background Check from all counties of residence during last seven years of adult life (run by the camp)

An Employee Health Form

US Government I-9 and W-4 Forms

Your Motor Vehicle Record if you will be involved in camp transportation. _____

A prescribed training program must be completed prior to service.

Driver's License # State Date of Birth

XIV. MAILING ADDRESSES:



Camp in the Community

PO Box 850

Alcoa, TN 37701

865-293-2482

whitney@campinthecommunity.org

APPLICANT'S CERTIFICATION

I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and statements made by me in this application (and accompanying resume, if any) are correct and complete. I understand that misrepresentation or omission of facts in this application may disqualify me from further consideration for employment, and may result in my discharge from employment, if discovered at a later date.

I understand that if I am employed, my employment may be terminated at any time by either myself or Holston Conference Camp and Retreat Ministries, Inc. for any reason, with or without notice. I agree that, should I be employed, said employment will be at-will and will not be governed by any contract, either express or implied.

I hereby authorize Holston Conference Camp and Retreat Ministries, Inc. or its designee to contact any or all of my references, churches, youth organizations, charities and former employers to inquire about my past job performance, education, personal character and any other topic deemed relevant by Holston Conference Camp and Retreat Ministries, Inc. I hereby authorize and agree that a criminal background check be conducted. I further agree that I will hold those individuals and entities who respond to requests for information harmless for any information they provide as a result of such contact, and release them from liability for the result of any such information. I hereby waive any right that I may have to inspect any information provided about me by any person or organization in the course of complying with this authorization.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file. I also expressly consent to submit to any physical examination that may be required of me, including drug and/or alcohol testing upon request both prior to and, if employed, during employment with Holston Conference Camp and Retreat Ministries, Inc. If I am employed, I understand and agree that I will be bound by the policies of Holston Conference Camp and Retreat Ministries, Inc.

Date

Applicant's Signature

THIS APPLICATION EXPIRES AFTER THE 2019 SUMMER CAMP SEASON.