

Camp Experience

Camp Name Director's Name City, State, ZIP Dates Camper or staff?

Personality

Rate yourself on a scale of 1 to 10.

Patience_____ Sense of Humor_____ Motivation_____ Ability to follow
instructions_____ Maturity_____

What do you consider to be your strongest qualities? _____

What personal characteristic would you like to improve? _____

Do you prefer to work alone or in a group? Why? _____

How would you describe yourself to someone who has never met you? _____

What do you imagine will be your greatest difficulty while at camp? _____

Why should we hire *you* as a staff member? _____

Any specials skills, certifications, or talents? _____

Anything else you would like to tell us about yourself? _____

Camp is a place where many young people come to trust adults and learn to be trusted. The atmosphere we attempt to create is one where each individual can feel valued and safe. Unfortunately, some places in our society which are considered "safe" have found that their setting is not so, most often because of the staff they have hired. It is our mandate that we thoroughly screen all applicants so that Moon Beach will be safe for staff and participants alike. These questions are presented here to fill this mandate for a safe environment. The following questions must be answered for this application to be considered.

Date of Birth _____

Do you have a driver's license? If yes, number _____ State _____

Have you ever been convicted or pled guilty to a felony or misdemeanor? NO YES

Have you ever been accused of any wrongdoing involving a minor? NO YES

Have you ever been accused of any sexual misconduct involving a minor? NO YES

If you answered yes to any of the above questions attach a page to this application fully explaining each situation.

Please list church or churches, if any, where you have regularly attended and are known by the pastor or another professional staff member. Nonattendance or non-regular attendance at any church will not automatically disqualify an applicant.

Church Name	City, State	Pastor or Contact	Church Member?	Dates
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Personal references

List four people who can and will verify your employability, work ethic and personality with some judgment as to your suitability to the position for which you have applied. Please do not include relatives.

Name	Address	City, State, ZIP	Phone	How does this person know you?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The information contained in this application is correct to the best of my knowledge. I authorize any references, churches or employers listed in this application to give a representative from United Church Camps, Inc. any information or opinions that they may have regarding my character and fitness for work with children and adults. In consideration of the receipt and evaluation of this application by UCCI, I hereby release any individual, church, organization, charity, employer, reference or any other person or organization, including record custodians, both collectively and individually, from 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 any right that I may have to inspect any information provided by any person or organization identified by me in this application. Should my application be accepted, I agree to be bound by the policies of UCCI and refrain from unacceptable and unscriptural conduct in the performance of my services on behalf of UCCI.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.

Applicant's Signature _____ Date _____

Witness _____ Date _____