

# Camp Staff Application

(Please print or type)

Return to: NEOLA Camp Ministry  
 P.O. Box 10230, Columbia, MO 65205  
 Fax: 573-442-1925

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Permanent Address \_\_\_\_\_  
Street & Number City State Zip

Phone \_\_\_\_\_ Cellular \_\_\_\_\_ Email \_\_\_\_\_  
Area Code & Number Area Code & Number

School or Business Address \_\_\_\_\_  
Street & Number City State Zip

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
Area Code & Number Area Code & Number

Dates Available:  Weekly salary desired: (if paid position)	Position I am interested in: (check one) <input type="checkbox"/> Camp Director (volunteer) <input type="checkbox"/> Cabin Counselor (volunteer) <input type="checkbox"/> Camp Nurse or EMT (volunteer) <input type="checkbox"/> Junior Counselor (volunteer) <input type="checkbox"/> Other: _____ <input type="checkbox"/> Program Staff (paid position)
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Do you meet or exceed the minimum age requirements for the position requested?    \_\_\_ yes    \_\_\_ no    \_\_\_ don't know minimum age

**Past Work History** Provide a full record of all employment – paid and volunteer – and explain any gaps in employment. Please include any positions on camp staff. Use a separate sheet if necessary.

Dates	Employer and Supervisor	Complete Address & Phone	Type of Work	Reason for Leaving

Indicate any employer you **do not** wish us to contact, and the reason \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**References** Include your minister and two people (not relatives) who have knowledge of your character, experience, work habits, and ability.

Name	Address, City, Zip	Phone (including area code)

**Experience working with children or youth** in a camp or other setting - volunteer or paid positions

Dates	Organization & Supervisor Name	Complete Address & Phone	Position held	Ages of Children

**Church Relationship**

Current Church (Congregation, denomination) \_\_\_\_\_ Member  yes  no  
 If yes, number of years \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Phone \_\_\_\_\_  
Area Code & Number

Church Address \_\_\_\_\_  
Street & Number City State Zip

Other Congregations attended regularly over past 5 years  
 (Congregation, denomination, city) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Authorization and Release of Information**

I authorize any persons, congregations, or other organizations listed by me here to give to the offices of the Northeast or Ozark Lakes Areas of the Christian Church (Disciples of Christ) of Mid-America Region (and/or its Areas), any information they may have regarding my character, experience, and fitness for work with children or youth.

In consideration of the receipt and evaluation of this information given by me here, I hereby release the Northeast and Ozark Lakes Areas of the Christian Church (Disciples of Christ) of the Mid-America Region, its agents, successors, and administrators from any and all claims, actions, causes of action, demands, rights, damages, costs, loss of service, expenses and compensation whatsoever which may at any time result from the use of the information provided by the above referenced persons, congregations, or other organizations listed by me.

I hereby waive any right I may have to inspect any information provided about me by any person, congregation, or other organization identified by me in this Camp Staff Application.

I understand that the information provided by me in this form and any information provided by any person, congregation, or other organization listed by me in this Camp Staff Application may be shared with staff members in the Northeast and Ozark Lakes Areas of the Christian Church (Disciples of Christ) of the Mid-America.

Should I become engaged in work with children or youth in church programs, I agree to be bound by the bylaws and policies of the Northeast and Ozark Lakes Areas of the Christian Church and to refrain from any unethical, abusive or exploitative conduct in the performance of my services in behalf of the church.

I authorize submission of my name(s), address, social security number, and other personal identifiers for background check procedures used by the Northeast and Ozark Lakes Areas for screening of paid and volunteer staff, including but not limited to searches of state and federal sex offender databases, criminal records, and child/elder abuse registries.

I have received a copy of the Statement of Intent to Eliminate Child Abuse and related guidelines.

**The information supplied by me in the foregoing Camp Staff Application is true and correct to the best of my knowledge. I have read the foregoing Authorization, and Release and fully understand it.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

**Camp Program and Support Skills** In the following list, put a **“T” in front of** any activity you can organize and teach as an expert, and an **“A” in front of** any activity in which you have experience and can assist. Put a **“C” after** any activity for which you have current certification and attach a copy of your certification.

**Adventure/Challenge**

- \_\_\_ team building/initiatives
- \_\_\_ ropes course
- \_\_\_ climbing/rappelling
- \_\_\_ spelunking/caving
- \_\_\_ \_\_\_\_\_

**Arts/Crafts**

- \_\_\_ ceramics/pottery/clayworking
- \_\_\_ drawing/painting
- \_\_\_ leather craft
- \_\_\_ candle-making
- \_\_\_ photography
- \_\_\_ woodworking
- \_\_\_ tie-dye
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Campcraft/Outdoor Living**

- \_\_\_ hiking
- \_\_\_ orienteering
- \_\_\_ outdoor cooking
- \_\_\_ outdoor living skills
- \_\_\_ campcraft
- \_\_\_ overnights
- \_\_\_ backpacking
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Dance (list)**

- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Drama**

- \_\_\_ clowning
- \_\_\_ improvisation
- \_\_\_ puppetry
- \_\_\_ \_\_\_\_\_

**Music**

- \_\_\_ singing
- \_\_\_ guitar (lead music)
- \_\_\_ instrument (list)
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Nature**

- \_\_\_ astronomy
- \_\_\_ birds
- \_\_\_ environment studies
- \_\_\_ flowers
- \_\_\_ forestry
- \_\_\_ insects
- \_\_\_ rocks/minerals
- \_\_\_ stream studies
- \_\_\_ weather
- \_\_\_ animals/animal care
- \_\_\_ \_\_\_\_\_

**Sports/Fitness**

- \_\_\_ aerobics/exercise
- \_\_\_ basketball
- \_\_\_ volleyball
- \_\_\_ Frisbee: ultimate/golf
- \_\_\_ fishing
- \_\_\_ martial arts
- \_\_\_ soccer
- \_\_\_ baseball/softball
- \_\_\_ yoga/stretching
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Religious/curriculum Activities**

- \_\_\_ keynote presentation
- \_\_\_ all camp worship
- \_\_\_ small group worship
- \_\_\_ small group discussion
- \_\_\_ Scripture study
- \_\_\_ evening devotional
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Health & Safety**

- \_\_\_ lifeguard (expires) \_\_\_\_\_
- \_\_\_ first aid (expires) \_\_\_\_\_
- \_\_\_ CPR (expires) \_\_\_\_\_
- \_\_\_ LPN/RN/EMT (circle one)
- \_\_\_ Food Handler's Permit

**Aquatic/Waterfront**

- \_\_\_ swimming
- \_\_\_ synchronized swimming
- \_\_\_ diving
- \_\_\_ SCUBA
- \_\_\_ canoeing
- \_\_\_ kayaking
- \_\_\_ sailing
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

**Miscellaneous**

- \_\_\_ cooking
- \_\_\_ gardening
- \_\_\_ foreign language (list)
- \_\_\_ \_\_\_\_\_
- \_\_\_ meditation
- \_\_\_ leadership training
- \_\_\_ radio/TV/video
- \_\_\_ computer skills
- \_\_\_ storytelling
- \_\_\_ large group games
- \_\_\_ small group games
- \_\_\_ \_\_\_\_\_
- \_\_\_ \_\_\_\_\_

Do you have a valid driver's license? \_\_\_ yes \_\_\_ no If yes, what state \_\_\_\_\_ Expiration \_\_\_\_\_

Do you have a valid chauffeur's type license? \_\_\_ yes \_\_\_ no Do you have a valid commercial license? \_\_\_ yes \_\_\_ no

Describe any specialized training, experience, or interests in camping or other fields which might have a bearing on the position for which you are applying. Attach a separate sheet if more space is needed.

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