



camp BUCKSKIN

STAFF APPLICATION

NAME: _____

Soc. Sec.# _____ (LAST) / _____ (FIRST) / _____ (MIDDLE I.)
D.O.B: _____ / _____ / _____ Male _____ Female _____

Driver's License # _____ State _____ Exp. _____

CURRENT ADDRESS: _____

Phone: (____) _____

E - mail : _____

I can be reached at my current address until: _____

PERMANENT ADDRESS: _____

Phone: (____) _____

Position(s) wanted: _____ Available: From: ____/____/____ To ____/____/____

How did you hear about our program? _____

Are you interested in receiving school credit for working at camp? _____

What interests you about our program? _____

EDUCATIONAL BACKGROUND: Please list high school first and then college(s).

SCHOOL:	YEARS	MAJOR	(EXPECTED) GRADUATION DATE & DEGREE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Future educational plans and/or vocational goals? _____

office use only:

App rcvd: _____ Ref. recd: _____ : _____ : _____ : Interview: _____
Offr made: _____ Agree rtnd: _____

WORK EXPERIENCE: (List previous employers with the most recent first)

1) EMPLOYER: _____	Position: _____
Address: _____	Supervisor: _____
Phone: (____) _____	Reason for Leaving: _____
Dates Employed: From: ____/____/____ To: ____/____/____	_____
2) EMPLOYER: _____	Position: _____
Address: _____	Supervisor: _____
Phone: (____) _____	Reason for Leaving: _____
Dates Employed: From: ____/____/____ To: ____/____/____	_____
3) EMPLOYER: _____	Position: _____
Address: _____	Supervisor: _____
Phone: (____) _____	Reason for Leaving: _____
Dates Employed: From: ____/____/____ To: ____/____/____	_____

Please list any work or volunteer experience with children/adolescents or adults, particularly "special needs" individuals: _____

Please list any leadership positions that you have held: _____

PREVIOUS CAMP EXPERIENCE:(as camper or staff)

1.NAME OF CAMP: _____	Position: _____
Address: _____	Director: _____
Dates: _____	Phone:(____) _____
2.NAME OF CAMP: _____	Position: _____
Address: _____	Director: _____
Dates: _____	Phone:(____) _____

CERTIFICATIONS: Please indicate which of the following **CURRENT** certifications or licenses that you hold. **Please attach copies of these with your application.**

- | | | |
|--|--|---|
| First Aid: <input type="checkbox"/> Standard | <input type="checkbox"/> Advanced | <input type="checkbox"/> Instructor |
| CPR: <input type="checkbox"/> Adult | <input type="checkbox"/> Child | <input type="checkbox"/> Infant |
| <input type="checkbox"/> EMT | <input type="checkbox"/> First Responder | <input type="checkbox"/> Wilderness First Aid |
| <input type="checkbox"/> Reg.Nurse | <input type="checkbox"/> ACA OLS Leader | <input type="checkbox"/> Canoe Instructor |
| <input type="checkbox"/> ARC Water Safety Instructor | <input type="checkbox"/> ACA OLS Instructor | <input type="checkbox"/> Licensed Teacher |
| <input type="checkbox"/> ARC Lifeguard Training | <input type="checkbox"/> Riflery Instructor | <input type="checkbox"/> Spec.Ed. Teacher |
| <input type="checkbox"/> Archery Instructor | <input type="checkbox"/> Class B Drivers License | |
| Other _____ | | |

ACTIVITY INTERESTS

In the following list of activities please check the box which best describes your ability in regard to that activity.

1= Can lead or direct

2 = Can assist in leading

3= Some knowledge and skill

'+'= Indicate activities you are most interested in

ARTS & CRAFTS

- Basketry
- Ceramics
- Jewelry making
- Nature Crafts
- Oil/Water painting
- Weaving
- Sketching/Drawing
- Tie-Dye
- Lanyards

OUTDOOR LIVING SKILLS

- Camp Craft
- Hiking
- Orienteering
- Outdoor Cooking
- Overnight Camping
- Knots
- Shelter Building
- Fire Building
- Use of saw/ax
- Fishing

MISC:

- Story Telling
- Native American Lore
- Photography
- Newspaper
- Worship Programs
- Foreign Languages:

NATURE/ENVIRONMENT

- Birds
- Animals
- Conservation
- Wildflowers
- Plants
- Insects
- Geology
- Astronomy
- Weather
- Farming

DANCE/DRAMA/MUSIC

- Folk Dance
- Jazz Dance
- Drama
- Skits
- Play Directing
- Song Leading
- Guitar
- Piano
- Other Instrument:

ARCHERY

- Basic Skills
- Maintenance

RIFLERY

- Basic Skills
- Maintenance

SPORTS

- Soccer
- Frisbee
- Hacky Sack
- Track & Field
- Baseball
- Volleyball
- Rugby
- Football
- Basketball
- Fishing
- Cricket
- Informal Games
- Softball
- Badminton

WATERFRONT

- Canoeing - river
- Canoeing - Flat water
- Swimming
- Lifeguarding

Swimming (your ability)

- Beginning
- Intermediate
- Advanced

Other Interests _____

ON A SEPARATE SHEET(S) OF PAPER, PLEASE ANSWER THE FOLLOWING QUESTIONS:

- 1) Please describe yourself in 10 words or less.
- 2) What knowledge, skills, or qualities do you believe you would contribute to our camping community?
- 3) What knowledge, skills, or results do you hope to gain or accomplish by working in our camp program?
- 4) As humans, none of us are perfect. Please describe both your strengths and weaknesses.
- 5) Write a concise yet inclusive autobiography describing your family and significant life experiences/accomplishments. Also include any specialized training/experiences in camping or working with children/adolescents with special needs.
- 6) Please provide *your* definition and then comment on how each of the following is important in working with children:

a) Consistency	b) Limit setting	c) Positive Reinforcement
d) Structure	e) Behavioral Expectations	f) Consequences

 Which of these do you feel is the most important and why?
- 7) Please provide *your* definition and then briefly comment on the importance of each of these in a child's development:

a) Social Skills	b) Self confidence	c) Self esteem	d) Role Models
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 Which of these do you feel is the most important and why?
- 8) What person has had the most influence on your life and why?

