

# Waycross, Inc.

## Summer Camp and Program Staff Application Form

Please fill out this application COMPLETELY and sign before returning it to Waycross!

Date \_\_\_\_\_

Full Name: \_\_\_\_\_ Gender: M F Nickname: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City State Zip

School Year Address: \_\_\_\_\_  
(If different from Home Address) Street City State Zip

To which address should we send mailings? HOME SCHOOL YEAR

Do you have a valid Social Security number? Yes / No Are you able to work legally in the USA? Yes / No

E-mail Address: \_\_\_\_\_

If you have a driver's license, please provide number and state of issue:

\_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_\_) \_\_\_\_\_

What is the best way to contact you? \_\_\_\_\_ When? \_\_\_\_\_

Will you be 18 or older as of June 1 of this summer? Yes / No If not, what is your birth date?

How did you hear about Waycross Camp? \_\_\_\_\_

What position are you interested in applying for? \_\_\_\_\_

What dates are you available for employment? \_\_\_\_\_

Education Level Completed by start of camp:

10<sup>th</sup> 11<sup>th</sup> 12<sup>th</sup> Some College work 4 year degree Masters degree or higher

**REFERENCES:** Waycross requests at least three character references. These references should include people who have seen you work with children/youth, people familiar with specific skills and abilities that you may use at camp. Include at least two individuals who have known you for more than one year, and a faculty or school administrator if you are currently enrolled. Please do not list relatives as references. **Please make sure you include ALL address and phone information!**

	Name	Relationship to you	Full Address	Phone Number
1.				
2.				
3.				
4.				

Applicant's Name: \_\_\_\_\_

**CURRENT CERTIFICATIONS:** (List month and year of expiration)

Water Safety Instructor \_\_\_\_\_ Pool Lifeguard \_\_\_\_\_  
 Lake Lifeguard \_\_\_\_\_ CPR \_\_\_\_\_  
 First Aid \_\_\_\_\_ Other \_\_\_\_\_

**EDUCATION HISTORY:** Include only High School and above. Begin with your most recent school. Use additional sheet of paper if needed.

1. School \_\_\_\_\_ Dates Attended \_\_\_\_\_  
 \_\_\_\_\_  
Street City State Zip
2. School \_\_\_\_\_ Dates Attended \_\_\_\_\_  
 \_\_\_\_\_  
Street City State Zip
3. School \_\_\_\_\_ Dates Attended \_\_\_\_\_  
 \_\_\_\_\_  
Street City State Zip

**WORK EXPERIENCE:** Please list all paid and volunteer work experience you have had in the past five years. Use a separate sheet if you need more space.

	Dates	Employer Name	Supervisor	Address & Phone Number	Position	Reason for Leaving
1.						
2.						
3.						
4.						
5.						
6.						
7.						

If you do not wish us to anyone named above, please indicate and explain.

**CAMP EXPERIENCE:** List all of your camp experience, both as camper or staff member.

Dates	Camp	Director	State	Camper or Staff
				C or S
				C or S

Applicant's Name: \_\_\_\_\_

**PERSONAL SKILLS:** On the following list put a numeral **1** at the left of those activities you could ORGANIZE, COACH, AND TEACH PROFICIENTLY (you must be personally skilled and experienced). Put a number **2** by those activities you could actively ASSIST IN TEACHING. Put a number **3** by those activities with which you have had SOME EXPERIENCE AND ENJOY DOING.

**Arts and Crafts**

- \_\_\_\_\_ Candles
- \_\_\_\_\_ Drawing
- \_\_\_\_\_ Fimo Clay
- \_\_\_\_\_ Jewelry
- \_\_\_\_\_ Leather Work
- \_\_\_\_\_ Macramé
- \_\_\_\_\_ Nature Crafts
- \_\_\_\_\_ Painting
- \_\_\_\_\_ Paper Making
- \_\_\_\_\_ Paper mache'
- \_\_\_\_\_ Pottery
- \_\_\_\_\_ Weaving
- \_\_\_\_\_ Woodworking

**Music**

- \_\_\_\_\_ Lead Singing
- \_\_\_\_\_ Instruments (list)
- \_\_\_\_\_ Banjo
- \_\_\_\_\_ Bugle
- \_\_\_\_\_ Guitar
- \_\_\_\_\_ Piano
- \_\_\_\_\_ \_\_\_\_\_
- \_\_\_\_\_ \_\_\_\_\_

**Drama**

- \_\_\_\_\_ Acting
- \_\_\_\_\_ Clowning
- \_\_\_\_\_ Directing
- \_\_\_\_\_ Illusions
- \_\_\_\_\_ Improvisation
- \_\_\_\_\_ Make-up
- \_\_\_\_\_ Mime

**Adventure/Challenge**

- \_\_\_\_\_ Climbing
- \_\_\_\_\_ Rappelling
- \_\_\_\_\_ Ropes Course

**Nature**

- \_\_\_\_\_ Animals
- \_\_\_\_\_ Astronomy
- \_\_\_\_\_ Birds
- \_\_\_\_\_ Conservation
- \_\_\_\_\_ Flowers
- \_\_\_\_\_ Forestry
- \_\_\_\_\_ Gardening
- \_\_\_\_\_ Insects
- \_\_\_\_\_ Rocks & Minerals
- \_\_\_\_\_ Trees and Shrubs
- \_\_\_\_\_ Weather

**Christian Education**

- \_\_\_\_\_ Bible Study
- \_\_\_\_\_ Discussion
- \_\_\_\_\_ Groups
- \_\_\_\_\_ Worship Planning

**Sports**

- \_\_\_\_\_ Archery
- \_\_\_\_\_ Badminton
- \_\_\_\_\_ Basketball
- \_\_\_\_\_ Bicycling
- \_\_\_\_\_ Fishing
- \_\_\_\_\_ Football
- \_\_\_\_\_ Informal Games
- \_\_\_\_\_ Large Group Games
- \_\_\_\_\_ Ping Pong
- \_\_\_\_\_ Soccer
- \_\_\_\_\_ Softball
- \_\_\_\_\_ Volleyball
- \_\_\_\_\_ \_\_\_\_\_
- \_\_\_\_\_ \_\_\_\_\_

**Waterfront Activities**

- \_\_\_\_\_ Canoeing
- \_\_\_\_\_ Kayaking
- \_\_\_\_\_ Swimming

**Dancing**

- \_\_\_\_\_ Ballet
- \_\_\_\_\_ Folk
- \_\_\_\_\_ Line
- \_\_\_\_\_ Social
- \_\_\_\_\_ Square
- \_\_\_\_\_ Tap
- \_\_\_\_\_ \_\_\_\_\_
- \_\_\_\_\_ \_\_\_\_\_

**Miscellaneous**

- \_\_\_\_\_ CPR Certified
- \_\_\_\_\_ AED Certified
- \_\_\_\_\_ First Aid Certified
- \_\_\_\_\_ Campfire Programs
- \_\_\_\_\_ Language Foreign

**Other Skills**

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

**Camp Craft**

- \_\_\_\_\_ Backpacking
- \_\_\_\_\_ Fire building
- \_\_\_\_\_ Hiking
- \_\_\_\_\_ Knot Tying
- \_\_\_\_\_ Minimum-impact
- \_\_\_\_\_ Camping
- \_\_\_\_\_ Orienteering
- \_\_\_\_\_ Outdoors Cooking
- \_\_\_\_\_ Wilderness
- \_\_\_\_\_ Camping
- \_\_\_\_\_ Skits
- \_\_\_\_\_ Storytelling

1. Are you able to lead hikes and camp outs? Please explain:
  
2. What other skills, hobbies, experiences or interests do you have that relate to childcare or work at camp?
  
3. Do you feel comfortable talking with children about God, upholding Christian values and attending devotions and worship services? Please explain your answer.
  
4. Are you active in your local church or parish? If yes, please list parish/church and pastor information and the activities you participate in.

**Conviction Statement:**

Have you ever been convicted of a felony or do you have felony charges pending against you?

**Yes or No** \_\_\_\_\_ Have you ever been convicted of a felony or misdemeanor other than minor traffic violations, or are there any charges pending against you? **Yes or No** \_\_\_\_\_ Have you ever had a substantiated child abuse, child sexual abuse or child neglect case against you?

**Yes or No** \_\_\_\_\_ Is there a petition naming you in juvenile, civil or criminal court concerning child abuse, child sexual abuse, or child neglect? **Yes or No** \_\_\_\_\_

***If yes to any of the above, please attach information relating to the conviction or offense or pending charge.***

***Before you report to work Waycross, Inc. will require a background check that may include criminal records and motor vehicle checks and a drug screening. In addition, American Camp Association Standards require employees complete a health history report and physical examination with a health care provider before camp begins.***

Do you have any physical, mental, or emotional problems that could interfere with your ability to perform job functions? **Yes or No** \_\_\_\_\_ **If yes, please explain and include any standards or practices that will help you uphold your duties while at camp.**

**Applicant's Statement:**

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize the investigation of all statements contained herein by Waycross, Inc. and I authorize the references listed herein to give Waycross, Inc. any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the same to you. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge, and that I will be required to abide by all regulations set forth by my employer.

Applicant's Name: \_\_\_\_\_  
(Please print full name)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If under the age of 18, Parent or Guardian Signature and Date: \_\_\_\_\_

*Parent or guardian printed name:* \_\_\_\_\_

**Return to:**

Camp Director  
Waycross, Inc.  
7363 Bear Creek Road  
Morgantown, IN 46160  
812-597-4241  
Fax: 812-597 4291