



# 2011 - STAFF APPLICATION

Name \_\_\_\_\_ Bird Name (Return Staff) \_\_\_\_\_

**Permanent Mailing Address**

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Area Code \_\_\_\_\_ Phone \_\_\_\_\_

**Present Mailing Address**

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Area Code \_\_\_\_\_ Phone \_\_\_\_\_

Present Address Good Until (date) \_\_\_\_\_ Social Security # \_\_\_\_\_

E-mail Address \_\_\_\_\_ Driver's License # \_\_\_\_\_

Church Affiliation \_\_\_\_\_ Birthdate \_\_\_\_\_ Marital Status \_\_\_\_\_

**Current Employment** (Give name and address of employer and type of work)  
 \_\_\_\_\_

Education: High School Graduate? \_\_\_\_\_ Yr. \_\_\_\_\_  
 College (Name) \_\_\_\_\_ Grad? \_\_\_\_\_ Yr. \_\_\_\_\_ Major \_\_\_\_\_

Physical: Do you have any limitations? \_\_\_\_\_ Describe: \_\_\_\_\_

**POSITIONS** Mark position for which you are applying.

- |  |  |  |                                      |
|--|--|--|--------------------------------------|
| <input type="checkbox"/> Counselor*        | <input type="checkbox"/> Head Cook               | <input type="checkbox"/> Science Camp Instructor         | <input type="checkbox"/> Trip Leader |
| <input type="checkbox"/> Crafts Instructor | <input type="checkbox"/> W.S.I.                  | <input type="checkbox"/> Program Director                | <input type="checkbox"/> CILT/       |
| <input type="checkbox"/> Activity Teacher  | <input type="checkbox"/> Tuck Shop Coordinator   | <input type="checkbox"/> Business Manager                | <input type="checkbox"/> BUILT       |
| <input type="checkbox"/> Nurse (RN)        | <input type="checkbox"/> Horsemanship Instructor | <input type="checkbox"/> Divisional Director*            | <input type="checkbox"/> BUILT       |
| <input type="checkbox"/> Assistant Cook    | <input type="checkbox"/> Maintenance             | <input type="checkbox"/> Team Elijah-Work Crew Counselor |                                      |

**\*COUNSELORS and DD APPLICANTS** Please indicate the age group with which you prefer to work:

(Please mark 1st and 2nd choices)

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> 3rd-4th grades _____<br>Pathfinders | <input type="checkbox"/> 5th-6th grades _____<br>Trailblazers | <input type="checkbox"/> 7th-8th grades _____<br>Challengers | <input type="checkbox"/> 9th-12th grades _____<br>Explorers |
|--|---|--|---|

**SESSIONS** Mark week(s) for which you are applying

- |   |   |                                     |   |   |   |
|---|---|-------------------------------------|---|---|---|
| <b>HORSE CAMP 1, 2</b>                    | <b>FAMILY CAMP 1, 2</b>                   | <b>TTC</b>                          | <b>GIRLS CAMP/CILT</b>                      | <b>S.O.A.R</b>                            | <b>SCIENCE CAMP</b>                     |
| <input type="checkbox"/> June 19 - 25     | <input type="checkbox"/> July 4 - 9       | <input type="checkbox"/> July 4 - 9 | <input type="checkbox"/> Wk 1: July 10 - 16 | <input type="checkbox"/> June 26 - July 2 | <input type="checkbox"/> August 8 - 13  |
| <input type="checkbox"/> Aug 14 - 20      | <input type="checkbox"/> July 31 - Aug 5  |                                     | <input type="checkbox"/> Wk 2: July 17 - 23 | <input type="checkbox"/> July 24 - 30     |   |
| <b>BOYS CAMP</b>                          | <b>BUILT</b>                              |                                     | <input type="checkbox"/> Wk 3: July 24 - 30 | <input type="checkbox"/> Aug 8 - 13       | <b>CAMP 101</b>                         |
| <input type="checkbox"/> June 26 - July 2 | <input type="checkbox"/> June 19 - July 2 |                                     |   |   | <input type="checkbox"/> August 14 - 17 |

**COUNSELORS:** For my activity class I'd like to teach \_\_\_\_\_ P T C E (circle age group).... max # \_\_\_\_\_

**LONG-TERM STAFF:** Pre-Camp Training is from June 19 (1:00pm) through June 25 (1:00pm). Mark this on your calendar!

**SHORT-TERM STAFF:** Plan to arrive the day before the camp session begins. **STAFF TRAINING IS MANDATORY.**

**All staff must bring a record of a current (within last 3 yrs) TB test.**

**CERTIFICATION/ TRAINING**

Please describe current Red Cross certifications (Swimming, First Aid, CPR, W.S.I., Lifeguard, Small Craft, etc.)

Please describe other current certifications/licenses (Archery, Riflery, Horsemanship, Nursing, etc.)

(We must have copies of ALL certifications or licenses attached to this application.)

**EXPERIENCES** (Please be specific)

As a Camp Staff Member:

Leadership with Children:

As a Camper:

**SPIRITUAL PREPARATION** On a separate piece of paper, please respond to the following. **Return staff answer 3-5**

1. Give your personal testimony.
2. How does someone become a Christian?
3. How is your spiritual commitment affecting your life and relationships?
4. In what areas of your life are you "growing"?
5. Discuss your involvement with the church you are presently attending.  
If you are not attending a church at this time, explain why.

**REFERENCES: Names of non relatives to whom you will send the reference form**

1. Pastor \_\_\_\_\_ Church Name \_\_\_\_\_

Address \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Street City State Zip Area Code Phone

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Street City State Zip Area Code Phone

3. Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Street City State Zip Area Code Phone

*NEW staff, please give a copy of the reference form to each person listed above, along with a stamped envelope addressed to: Amy Goodwin, Huron Forest Camp CedarRidge, 36208 Freedom Rd, Farmington, MI 48335*

Have you lived in other states within the past ten years? If so, please list and give dates:

Have you been convicted of anything other than minor traffic violations? \_\_\_\_\_ If yes, explain:

Do we have your permission to do a criminal/sex offender/police record check? YES NO

Do you now or have you in the past year used tobacco, alcoholic beverages, or illegal drugs? \_\_\_\_ If yes  
Please identify which, how often and most recent usage:

Have you in the past year exposed yourself to print, video or Internet pornography? \_\_\_\_ If yes  
Please explain what steps you are taking to correct the situation:

Are you currently struggling with sexual temptation in a relationship? \_\_\_\_ If yes  
How are you resisting the temptation?

(If you need help in any of the areas above please let us know so we can connect you with biblical counsel.)

**AIMS**

1. What personal goals would you have coming to Huron Forest Camp CedarRidge this summer?

2. What contributions would you be able to make to this camp ministry?

**COMMITMENT**

I understand that being a HFCC staff member means serving and cooperating with all staff members as unto the Lord, obeying camp policies and sacrificing personal desires in the interest of campers and other staff. My aim is to make the reality of Jesus Christ known to others through my life.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**TO PARENTS**

List the name(s) and grade(s) of your children who will be camper(s): Be sure to mail in registration from brochure to Registrar.

List the name(s) and age(s) of your non-camper children who will be "staff-kids", Ages 4-10:

**SEND APPLICATIONS TO**

Amy Goodwin - Camp Director  
Huron Forest Camp CedarRidge  
36208 Freedom Rd,  
Farmington MI 48335  
(248) 615-9844

*Huron Forest Camp CedarRidge is an at-will employer.*

After June 10 send directly to camp:  
Huron Forest Camp CedarRidge  
1154 W River Rd,  
Oscoda MI 48750  
(989) 739-3571



Date: \_\_\_\_\_

**CONFIDENTIAL Staff Character Reference**

\_\_\_\_\_ has applied for a summer staff position as \_\_\_\_\_ at Camp CedarRidge and has given your name as a reference. We feel it is our obligation to do all in our power to protect our campers from the threat of harm. Recognizing that each staff member has the potential to impact campers in either a positive or a negative way, we wish to provide our campers with a staff that has strength of character, are service motivated and have overall integrity. With this in mind, please complete this evaluation of the applicant's character. All information will be held in strict confidence.

**How long have you known the applicant?** \_\_\_\_\_ **In what capacity?** \_\_\_\_\_

**How well do you feel that you know the applicant?** \_\_\_Very well \_\_\_Rather well \_\_\_Casually

**If you had a child of camper age, how would you feel having your child spend six days with the applicant as an example?**

\_\_\_Positive \_\_\_Comfortable \_\_\_Not sure \_\_\_Concerned

**Do you have any doubts or questions concerning the applicant's moral behavior?**

\_\_\_Yes \_\_\_No If Yes please explain \_\_\_\_\_

**To your knowledge, has the applicant ever been accused of any improper conduct around children?**

\_\_\_Yes \_\_\_No

**Knowing the applicant as you do, would you encourage us to accept the applicant?**

\_\_\_Yes \_\_\_No - I prefer to discuss this applicant further. Please call me. (\_\_\_\_\_) \_\_\_\_\_

**Please check the proper column to best describe the applicant:**

	Outstanding	Above Average	Average	Fair	Not Observed	Comments
Ability to work with children in grades						
1-2						
3-4						
5-6						
7-8						
9-12						
Dependability						
Emotional Stability						
Flexibility						
Influence						
Organizational ability						
Personal appearance						
Punctuality						
Quality of work						
Responsibility						
Self-discipline						
Soundness of judgment						
Tactfulness						

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Title (if applicable) \_\_\_\_\_

**Thank you so much for your help. Please feel free to attach additional comments.**



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

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