



Summer Explorers Day Camp 2019

Application for Summer Staff

Thank you for your interest in becoming a staff member at Summer Explorers Camp. At Summer Explorers, we value people that bring creativity, positivity, and dedication to our team. We want only the best for our campers, so we plan on hiring the best.

Only applicants that submit COMPLETE packages will be considered for a staff position. Here is what a complete application packet contains: 1) Summer Explorers 2019 Staff Application, 2) At least one reference form from a teacher, supervisor, or someone else unrelated to you.

All application packages must be submitted to the Full Life Christian Center Outreach office by 6PM on June 1, 2019.

Getting Personal

Name: _____ Phone Number: _____

Alt Phone: _____ E-mail: _____

Address: _____ City: _____ Zip: _____

Will you be at least 18 years old August 2019? Yes No

Will you be 18 years or older by August 2019? Yes No (if yes, you will be required to have a background check)

School: _____ Year you plan to graduate: _____

If in college, major: _____ minor: _____

If 18 or younger, Parent's Name(s): _____

Phone where parent can be reached: _____ home work cell

Do you have any previous experience working with children? Yes No

Please describe your experience with children and/or other volunteer experience:

Do you have a personal relationship with Jesus Christ? yes no

If yes, when and how did you become a Christian? What changes have you seen in your life?

What church do you attend and how often do you attend your church services?

Emergency Contacts

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Do you take medicine on a regular basis? Yes No If yes, please list type and how many times a day.

Do you have any medical condition we should be aware of?

Doctor Name & Address: _____

Phone: _____ Insurance Provider & Policy _____

Getting Real

Check if you have been charged with or convicted of the following:

Child abuse Sexual molestation Neglect Anything more serious than a traffic violation

Check if you have ever been treated for any of the following:

Drug Abuse Alcohol Abuse Mental Health Issues Other Health Issues

Are you now, or have you ever used illegal drugs? Yes No

If you checked any boxes or checked a “yes”, please explain. Use extra paper if you need.

Staff Members age 18 and Older:

In order to work with the students at Summer Explorers Camp, a Federal and State background check as well as a search of the National Sex Offenders list, will be done.

I understand that my information will not be released without my consent, and all personal information will be kept in a confidential file. _____ Initial

Please contact FLCC to obtain the necessary forms for background check. If you already completed the Live Scan background check for FLCC, You do not have to do it again.

Getting the Job

Place a check by the following words that describe you:

<input type="checkbox"/>	Team Player	<input type="checkbox"/>	Thorough	<input type="checkbox"/>	Leader	<input type="checkbox"/>	Strong Willed	<input type="checkbox"/>	Friendly
<input type="checkbox"/>	Reliable	<input type="checkbox"/>	Honest	<input type="checkbox"/>	Compassionate	<input type="checkbox"/>	Teachable	<input type="checkbox"/>	Committed
<input type="checkbox"/>	Humble	<input type="checkbox"/>	Flexible	<input type="checkbox"/>	Risk Taker	<input type="checkbox"/>	Self-Starter	<input type="checkbox"/>	Intelligent
<input type="checkbox"/>	Sensitive	<input type="checkbox"/>	Patient	<input type="checkbox"/>	Even Tempered	<input type="checkbox"/>	Energetic	<input type="checkbox"/>	Laid Back

Summer Explorers Camp Staff are required to be at the following events:

- Training: TBD (from about 9AM to 3PM)
- Summer Explorers Camp: Jul 29th - Aug 9th, 2019 (8AM to 5PM daily)

Will you have any problems with these requirements? Yes No

Please explain if necessary:

Which position are you applying for? Teacher (responsible for curriculum) Intern / Volunteer

Camp Shirt: Please select the size for camp t-shirt YM YL AS AM AL AXL

Acknowledgements

Please sign below if you agree with the following: "I am willing to be trained, supervised, and reviewed by the FLCC Summer Explorers Directors. I understand that I will be considered an important member of the staff, and will be expected to assume responsibilities as directed by the FLCC Summer Explorers Directors, including attendance at training sessions when needed. I accept this as a commitment to Christ and His church. I also give my authorization to Full Life Christian Center and its representatives to verify the information on this form. I verify that the information on this application is true. By signing, I confirm that I have read the Staff Job Descriptions, and I am aware of the expectations that come with the position(s) that I am selected for. By signing below, I also promise to set a Godly example to the children and parents I will be serving, and to exhibit a Christ-like attitude towards all of my fellow staff members" (see Eph 4:1-6).

Applicant Signature

Date

Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children or youth work. In consideration of this evaluation Summer Explorers Camp, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind of 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 about me by any person or organization identified by me in this application. In the event of an emergency, I give permission to Summer Explorers to obtain medical treatment for me if my emergency contact cannot be reached.

Should my application be accepted, I agree to be bound by the bylaws and policies of the Summer Explorers Camp and to refrain from unscriptural conduct in the performance of my services on behalf of the center.

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 _____

Parent or Guardian Signature (under 18) _____ Date _____

For Office Use Only

Director's Signature _____ Date _____ Approved Denied

Assigned Position: _____

Interview Date: _____ With: _____



Summer Explorers Day Camp 2019 Reference Form

Instructions to the Applicant: Fill out the top portion of this form (below) and give it to your reference to complete the bottom portion. Have your reference return this form to you in a sealed envelope or directly to Summer Explorers at the address provided on the bottom of this form.

THIS PORTION TO BE COMPLETED BY APPLICANT

Print full name of applicant: _____

By signing this form, I, the applicant waive my right to view this completed reference form.

Applicant Signature: _____ Date: _____

To Whom It May Concern:

This person is applying to become a staff member at Summer Explorers Day Camp and has selected you as a reference. People in this position are in close contact with children and youth, and we desire to be as certain as possible that this will be a positive experience for all parties. We appreciate your assistance in helping us determine this person's suitability as a staff member by responding to the following questions:

THIS PORTION TO BE COMPLETED BY REFERENCE

Full Name: _____ Phone Number: _____

Email: _____

How do you know the applicant? :

Amount of time you have known the applicant: _____

How well would you say you know him/her? very well well average not very well not at all

Please use the following scale to respond to the questions below:

(1=NOT KNOWN 2=POOR 3=BELOW AVERAGE 4=AVERAGE 5=EXCELLENT)

Rate his/her involvement in peer relationships.	Rate his/her emotional maturity.
Rate his/her consistency in commitments.	Rate his/her ability to relate to children.
Rate his/her response to authority.	Rate his/her sensitivity to the needs of others.

(Form continued on next page)

Place a check by the following words that best describe this applicant:

	Team Player		Thorough		Leader		Strong Willed		Friendly
	Reliable		Honest		Compassionate		Teachable		Committed
	Humble		Flexible		Risk Taker		Self-Starter		Intelligent
	Sensitive		Patient		Even Tempered		Energetic		Laid Back

Describe the applicant's greatest strengths?

Describe the applicant's apparent weaknesses?

Other comments or reservations:

To your knowledge, has the applicant ever been accused or charged with child abuse, sexual molestation, neglect or anything more serious than a traffic violation? Yes No If yes, please explain on separate sheet.

I, _____ (Full Reference Name), assert that all information above is true and correct, to the best of my knowledge.

Signature _____ Date _____
Reference Signature

Thank you for taking time to complete this questionnaire. Feel free to contact us with any additional questions or comments. Your prompt response is appreciated. Please mail response to:



Summer Explorers Camp
Full Life Christian Center
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