

CAMP STAFF APPLICATION

PERSONAL INFORMATION

Name _____ Are you 18 years of age or older? Yes___ No___ Dates available _____
 Present Address _____ City _____ State, Zip _____
 Permanent Address _____ City _____ State, Zip _____
 Phone _____ Email _____
 Present Occupation or Year in School _____
 Where did you learn about the position? _____
 Have you ever been convicted of a crime, other than traffic violations? Yes___ No___ If yes, please state offense, date and location. A conviction record will not necessarily be cause for disqualification. _____

LOCATION DESIRED Check first and second choice. Camp Cahinnio ___ Camp Crossed Arrows ___

POSITION DESIRED Check first and second choice.

___ Asst. Camp Director ___ Program Director ___ Unit Leader ___ Unit Counselor ___ Waterfront Director
 ___ Lifeguard ___ Canoe Instructor ___ Arts & Crafts Director ___ Business Manager ___ Cook
 ___ Kitchen Assistant ___ Horseback Riding Director (Head Wrangler) ___ Horseback Riding Staff (Wrangler) ___ Health Supervisor (RN, LPN, EMT, ECT) ___ Counselor In Training Director

CAMP PROGRAM SKILLS AND AREAS OF INTEREST

Arts/Crafts ___ ceramics/pottery ___ drawing/painting ___ leather craft ___ metal work ___ photography ___ woodworking ___ storytelling ___ creative writing ___ other _____	Music ___ singing/camp songs ___ instruments ___ other _____	Sports/Fitness ___ yoga ___ archery ___ dance ___ softball ___ basketball ___ fishing ___ football ___ gymnastics ___ horseback riding ___ rainy day activities ___ spa/personal care ___ soccer ___ volleyball ___ outdoor games ___ indoor games ___ cheerleading ___ other _____	Waterfront Activities ___ canoeing ___ kayaking ___ SCUBA ___ swimming ___ snorkeling ___ sailing ___ other _____
Camp Craft/Pioneering ___ camp craft ___ hiking ___ orienteering ___ outdoor cooking ___ outdoor living skills ___ overnight camping ___ wilderness survival ___ GPS	Nature/Science ___ animals/animal care ___ astronomy ___ aviation ___ birds ___ environmental studies ___ flowers ___ forestry ___ insects ___ rocks/minerals ___ weather ___ marine biology ___ other _____	Adventure/Challenge ___ challenge games ___ teambuilding activities	Miscellaneous ___ foreign language ___ leadership development ___ other _____

EDUCATION

Name of current or last school attended _____
 Degree Level Achieved ___ Diploma/GED ___ Bachelor's Degree ___ Master's Degree ___ Other (specify) _____
 List major study and any specific courses related to position desired. _____

EXPERIENCE AS CAMP STAFF MEMBER or CAMPER

Camp Name	City and State	Position Held	Year	Sponsoring Organization

CERTIFICATIONS AND TRAININGS

Please list all relevant trainings and all certifications held, along with expiration dates.

Certification	Expiration Date	Training	Dates of training

ACTIVITIES

Briefly summarize community, school, or other experiences that will enable you to carry out the responsibilities of the job you are seeking. Include any additional skills, including supervision skills, other languages or information related to the position desired that you wish to bring to the employer's attention. _____

EMPLOYMENT AND VOLUNTEER EXPERIENCE List most recent experience first

Employer Name	Address and Phone Number	Dates Employed
Major Responsibilities	Supervisor's Name	Reason for Leaving
Employer Name	Address and Phone Number	Dates Employed
Major Responsibilities	Supervisor's Name	Reason for Leaving

REFERENCES

List 3 persons NOT related to you who can judge your qualifications for this position. If you have previous experience as a camp staff member, one reference should be from a camp director or camp administrator. References from relatives will not be accepted.

Name	Phone	Address	Position

Do you know of any reason why you would not be able to perform the essential functions of the position for which you are applying for with or without reasonable accommodations? ___Yes ___No If yes, what accommodations might be necessary? _____

Do you have any relatives working for this agency? ___Yes ___No

If you are hired, are you prepared to present evidence within three days of beginning work showing that you are legally authorized to work in the United States? ___Yes ___No

I hereby certify that all statements made in this application are true. I understand that any misstatement, misrepresentation, material omission, or falsification of facts shall cause forfeiture of all rights to employment with the Girl Scouts – Diamonds of Arkansas, Oklahoma and Texas. I understand that as a conditional offer of employment, the following tests may be required by Girl Scouts –Diamonds: medical evaluation, background check, driver's check, criminal history check, and a physical demonstration of job related skills.

By signing or typing my name in the following box, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing my employment application and information.

SIGNATURE (Submittal of this application is considered an electronic signature)

DATE

Please return application to: (by mail) Girl Scouts, Attn: Linda Archer 2080 East Joyce Blvd,
Fayetteville, AR 72703, (by fax) 479-695-1824 , (by email) larcher@girlscoutsdiamonds.org.

