

The Springs Camp

Staff Application

Personal Information: Please attach a current photo

Name _____
Last First Middle

Birth date _____ Marital Status _____

Home/Parents Address _____

City _____ State _____ Zip _____

Current/College Address _____

City _____ State _____ Zip _____

Contact numbers: Your cell _____

Parent's home _____

Parent's cell _____

The physical demands of a summer ministry are great. Early mornings, late nights, long days, constant activity, working in heat, standing for long periods, lifting, etc.

Health: Do you have any health concerns or physical limitations that would make it difficult to meet the demands of working an entire summer? _____

Church Background:

Home Church _____

Address _____

City _____ State _____ Zip _____

Phone number _____ Pastor _____

Are you a member? Yes or No

List any areas of ministry that you are now or have been working at this church. _____

Church you currently attend _____

Address _____ state _____ zip _____

List any areas of ministry that you are now or have been working at this church _____

How often do you currently attend Church services in a week?

___ 4 or more ___ 3 times ___ 2 times ___ 1 time

Education:

Present Grade in School: High School _____ College _____

School you are presently enrolled in _____

Please list the schools you have attended:

High School _____

Colleges _____

Major, if in college _____

Last Day of school this year _____ First Day of School in the Fall _____

List any areas you have participated in at your schools _____

Describe your devotional life _____

Describe any opportunities you have had to share Christ with others _____

Personal Profile:

What do you feel are three of your personal strengths?

What are some of your weaknesses?

What are some of your hobbies? _____

What are your short term goals and plans? schooling, job, training etc. _____

What are your long term goals and plans? Where do you see yourself in 10 years, 20 years

Have you used tobacco or alcoholic beverages in the last 12 months? yes no

Have you used any drug in an illegal manner in the last 12 months? yes no

Do you have an ongoing, continual struggle with any of the following?

gossip cheating stealing deception lying

pornography course language drunkenness self mutilation

(can be discussed in person if you are hesitant to mark yes)

Do you believe and practice abstinence regarding sex before marriage? yes no

Have you ever been accused or convicted of any sex crime? yes no

Have you ever been convicted of a crime other than a minor traffic violation? yes no

If yes, please explain _____

Response to Authority:

If chosen for a ministry position at The Springs would you agree to abide by the guidelines set out for the summer staff? yes no

Would you follow and support the leadership and the supervisors over you? yes no
How do you respond to conflict?

Family Background:

Parents _____

List names and ages of brothers and sisters? _____

Where do you fit into the order of your siblings? Oldest, youngest etc _____

Describe your relationship with you parents. _____

Have you discussed your application to work this summer with your parents? Are they in agreement with you spending your summer in ministry? _____

Skills and interests: (mark any that you have skill in)

<input type="checkbox"/> canoeing	<input type="checkbox"/> archery	<input type="checkbox"/> computers	<input type="checkbox"/> photography
<input type="checkbox"/> swimming	<input type="checkbox"/> riflery	<input type="checkbox"/> paintball	<input type="checkbox"/> crafts
<input type="checkbox"/> climbing	<input type="checkbox"/> volleyball	<input type="checkbox"/> hiking	<input type="checkbox"/> media
<input type="checkbox"/> cooking	<input type="checkbox"/> drama	<input type="checkbox"/> music	<input type="checkbox"/> other _____

Do you have any certifications that would be helpful to your summer here? _____

Drama or Music Ability or interest: circle any you have been involved in.

Singing	Piano	musical instrument _____		
Leading worship	drama	guitar	drums	bass

Choose the top five areas where you would like to serve this summer. 1 being your 1st choice.

<input type="checkbox"/> counselor	<input type="checkbox"/> crafts	<input type="checkbox"/> store	<input type="checkbox"/> lifeguard
<input type="checkbox"/> cleaning	<input type="checkbox"/> Laundry	<input type="checkbox"/> kitchen help	<input type="checkbox"/> cook
<input type="checkbox"/> maintenance	<input type="checkbox"/> office	<input type="checkbox"/> Program	<input type="checkbox"/> media/video
<input type="checkbox"/> lawn care	<input type="checkbox"/> music		

Thank you for taking the time to fill out this application. We will be processing this application once your references have arrived at the camp. We hope to be talking to you soon. If, in the mean time, you have any questions don't hesitate to call.

I _____ hereby authorize The Springs to contact any prior employers and any references listed to verify information related to my character and work performance. I release all references and employers from any liability for information provided in good faith. I hereby affirm that I will carefully read and agree with The Springs summer staff guidelines. If at anytime I no longer agree with The Springs guidelines or I exhibit conduct which is contrary to the guidelines, I may be disqualified from employment.

I affirm that I have neither been convicted of, or accused of any offense involving actual or attempted child abuse or sexual misconduct.

I affirm that by signing below that all of the information I have given is true and complete.

Signature _____ date _____

If under 18, signature of your parent or guardian is required

Mother _____ date _____

Father _____ date _____

Guardian _____ date _____