Summer Staff Application Form

Bay Shore Camp and Family Ministries

Sebewaing, MI 48759; 989-883-2501 www.bayshorecamp.org

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|--|--|---|--|---|----------------|
| ying For: | Volunteer | ☐ Day Camp | | ☐ Site-Staff | |
| Name: | | First Name: | | Middle Name: | |
| Street Addre | ss | | | | |
| City | | State | Zip | Cell Phone # | (000-000-0000) |
| Email addres | ss | Are | you: On Facebook | | On Instagram? |
| Gender: | | Marital Stat | us | | |
| Male | Female | Single | Engaged M | Iarried Separa | ted Divorced |
| Progr Food Main Lifeg Day (Multi AV To In addition to AED, Boy or (| Camp Staff -Media Staff echnician the above informat | tion, please list all cert al Rifle Association, etc | De Nu Ba Ot ificates that you hold, | ounselor ean urse and cher current or expired (| |
| | | lents, musical abilities | | | |
| Are you a forn Where? 1. 2. 3. | ner Bay Shore Can | np or staff member fron Positio | n another camp? on held? | <u>Nu</u> | umber of years |

| Please list any dates that | you need to be gone | 9. | | | |
|---|-----------------------|-----------|--------------------------|---------------|--|
| | | | | | |
| | See our Can | np Calend | ar at <u>www.bayshor</u> | ecamp.o | org for help on our summer s |
| Home Church | | | | Pastor | 's Name |
| Office Street Address | | | | Pastor 000-00 | 's Office Phone (000- 00) |
| City | | State | Zip | Church | n or Pastor's Email |
| | | | | | |
| | | | | | |
| High School | | | | I | Date of Graduation (mm/yyyy |
| High School Current College | | | Number of years | | Date of Graduation (mm/yyyy Date of Graduation (mm/yyyy) |
| | | | Number of years | | Date of Graduation |
| Current College | | State | Number of years | | Date of Graduation mm/yyyy) |
| Current College Your address at College | llege, on what date c | | Zip | (| Date of Graduation mm/yyyy) |
| Current College Your address at College School City If you are currently in co | llege, on what date o | | Zip | (| Date of Graduation mm/yyyy) |

| In aı | n effort to comply with ma | andates issued for all camps by the | Michigan Bureau | u of Regulatory S | Services, we ask for |
|-------|--|---|----------------------|--------------------|----------------------|
| your | cooperation in giving us | the following information (see "Cer | tification" paragr | raph at the end o | f the application |
| form | n): | | | | |
| Date | of Birth (mm/dd/yyyy) | Drivers License Number | | State Issued (| (Driver's License) |
| | | | | | |
| > | Have you ever been convi | cted of any offense other than min | or traffic violation | ns? Yes | □No |
| > : | Have you ever been convi | cted of (or are you the subject of pe | nding charges for | r) any offense inv | olving actual or |
| ; | attempted child abuse or | sexual molestation in any state or | country? | Yes | □No |
| Addi | If yes to either of the about itional Space Section. | ove questions, please provide detail | s (including dates | s and how it was | resolved, etc.) See |
| | | rill you be able to verify that you as ship (or permanent residence statu | | | |
| To p | rove US Citizenship, you | will need to show: (upon accepta | nce bring these w | vith you to camp) |) |
| > . | Your original social secur | ity card, or a certified copy of a bir | th certificate, or a | working visa | |
| | And | | | | |
| | Another form of identificategistration card. | tion such as a driver's license, scho | ool photo I.D. card | d, valid US passp | oort, or voter |
| | | | | | |
| | ou have any physical, me tion for which you are app | ntal or medical impairment or disa | bility that would | limit your perfor | rmance in the |
| Y | | ease explain: | | | |
| | | | | | |
| Are | you currently under psycl | niatric care or counseling, or taking | g prescription dru | gs for similar con | nditions? |
| | Yes No If yes, pl | ease explain: | | | |
| | | | | | |
| | | | | | |

Employment Experience:

Please list your last three jobs (if possible) beginning with your present (or last) job. Include military service assignments and volunteer activities. It is important that you fill in this section as completely as possible.

| Employer | | Supervi | sor | |
|----------------|--------------------|---------|-----|------------------------------|
| Address | City | State | Zip | Phone (000-000-0000 |
| Job Title | Reason for Leaving | | | Employed from: |
| (mm/dd/yyyy) | | | | |
| Work Performed | | | | Employed to: (mm/dd/yyyy) |
| Employer | | Supervi | sor | |
| Address | City | State | Zip | Phone (000-000-000 |
| Job Title | Reason for Leaving | | | Employed from: |
| (mm/dd/yyyy) | | | | |
| Work Performed | | | | Employed to: (mm/dd/yyyy) |
| Employer | | Supervi | sor | |
| Address | City | State | Zip | Phone (000-000-000 |
| Job Title | Reason for Leaving | | | Employed from: |
| (mm/dd/yyyy) | | | | |
| Work Performed | | | | Employed to: (mm/dd/yyyy) |

IMPORTANT! Please answer the following and attach or send in later. These are important issues; especially as they relate to the position you seek here at Bay Shore Camp. Please give them careful consideration and take the time to answer them completely. If you have been a volunteer or staff member previously at BSC, you need only answer numbers 1 and 3. If you are applying for a Leadership position please also answer number 7.

- 1. Please tell us why you desire to serve at Bay Shore Camp this summer.
- 2. Please describe (with scriptural support) Christ-given salvation and how it influences your daily life
- 3. Describe events or situations (within the last year) that lead you to believe that you are a growing Christian.
- 4. List three positive attributes that you believe you possess. Explain why you think they would apply in a camp setting.
- 5. (Paid Staff Only) Please explain your choice of positions as you have listed them and any experience that you may have.

Remember to write your name on the essays.

INTERVIEW:

The other component of the application process is an interview. Our preference is that this be done at Bay Shore Camp, however, we realize that may not work in every situation. Sometimes we are in your area or a meeting spot can be arranged. Online options are available, and a last resort of a phone interview is possible. When we have received your application we will contact you about possible interview times and opportunities.

| Character References: | |
|--|--|
| adults (but not relatives) to fill another church leader. Please l | rences sent to Camp using the Bay Shore Camp Character Reference Forms. Selected the sent these forms. Preferably one form should come from your Pastor, Youth Pastor, have your reference person send the completed reference to us. This can be done to reference form is available on our website |
| 1) Name | Relationship |
| 2) Name | Relationship |
| 3) Name | Relationship |
| 4) Name | Relationshin |

"I recognize that Bay Shore Camp and Family Ministries is relying on the accuracy of the information I have provided in this application form. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct. I understand that the completion and/or execution of this application does not insure me a volunteer or paid position, nor does it obligate me or the organization in any way. I fully understand that the omission and/or misrepresentation of facts requested may be cause for immediate dismissal without prior notice. I am willing to submit to a physical examination if requested by the organization. I authorize the organization to contact any person or entity listed on this form, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications. I voluntarily release the organization and any such person or entity listed on this form from liability involving the communication of information relating to my background or qualifications. I further authorize Bay Shore Camp to conduct a criminal background investigation. I have read, understand and agree to the above." *Please type your name in the box as your signature!*

| oighatare. | |
|---|--------------|
| Applicant's Signature: | Date |
| | (mm/dd/yyyy) |
| | |
| Parent or Guardian Signature (if applicant is a minor): | Date |
| | (mm/dd/yyyy) |

Thank you for your application. We trust that the Lord has led you in your desire to be a part of the Bay Shore summer staff. It is a big responsibility! We will get final word to you just as soon as we have reviewed your application and received all your references. As a reminder – check to see that you have given all required information. A recent photograph is not required, but it is appreciated. Thank You!

READY TO SEND THIS APPLICATION TO CAMP?

First, save this application! Then attach the saved file to the email listed below. You can attach your essays or include them in the email. You may also print and mail this application to us. Please use the address listed on the front page of this application. We will contact you when we have received your application.

Send to Matthew Chisholm

program@bayshorecamp.org