

ST. DOROTHY'S REST
Summer 2010
Assistant Camp Director Application

Name _____

Home Address _____

_____ Zip _____ Home Telephone() _____

Email address: _____

Name & Address of parents _____

_____ Tel:() _____

School Address _____

(If applicable)

_____ Zip _____ School Telephone() _____

Have you ever been convicted of child molestation or any other criminal

activity? Yes or No If YES, please describe:

Have you been to St. Dorothy's before? _____ If so, as a camper? _____

Are you currently certified in any of the following? (Check all that apply.)

___ Standard First Aid ___ CPR ___ Lifeguard

OPTIONAL: Religious Affiliation _____ (if any) Parish _____

IMPORTANT: Any conflicts with the schedule or Requests for time off must be put in writing here (Bulletin attached)

Please list and describe any experiences, jobs, training or volunteer work you have received or performed which prepared you, directly or indirectly, for the job you are seeking:

Why do you want to work at St. Dorothy's?

St. Dorothy's Rest is an institution of the Episcopal Church. Our purpose is to live as a caring, Christian community and to appreciate God's creation around us. What does this mean to you?

Describe a situation you had growing up where someone older influenced you:

St Dorothy's welcomes new and creative ideas for camp activities (i.e. arts and crafts, sports, games, nature projects, dance, drama, music, etc.) As a member of the leadership staff, describe any activities that you would like to introduce or lead with campers or staff.

Is there anything else that you would like us to know about you?

Are you willing to abide by all policies and procedures outlined in the employee code of conduct? (see attached) Why do you think a code of conduct is important for a summer camp?

Working on the St. Dorothy's Rest Summer Staff is a huge commitment, and involves long hours of work and is a very important job? What does this mean to you?

10.) References: Please give names and telephone numbers of 2-3 people (not relatives) who know your character, strengths and weaknesses.

<u>Name</u>	<u>Telephone No.</u>	<u>Relationship to you</u>
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1)

2)

3)

By my signature below, I certify the following:

- The following set forth in my application are true and correct.
- I authorize St. Dorothy's Rest to obtain a criminal background records check and hereby fully release and discharge my prospective employer or other sources providing information from all claims and damages arising out of or relating to any investigation of my background for said purposes.

Date _____ Signature _____

This application is not complete without your signature.