

## Camp Medley Staff Application Form 2010

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Home Address \_\_\_\_\_ Social Insurance Number \_\_\_\_\_

\_\_\_\_\_ Email address \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Cell phone number \_\_\_\_\_

School Address \_\_\_\_\_ How many years have attended Camp Medley? \_\_\_\_\_

School Telephone Number \_\_\_\_\_ How many years have you been staff at Camp Medley? \_\_\_\_\_

Priest or Minister \_\_\_\_\_

Church Name \_\_\_\_\_ How many years have you been to other camps? \_\_\_\_\_

Church Address \_\_\_\_\_

\_\_\_\_\_ How many years have you been staff at other camps? \_\_\_\_\_

Church Telephone Number \_\_\_\_\_

### List Schools Attended

School	Date Started	Date Finished

### List Prior Employers

Employer	Date Started	Date Finished

### Please check the activities that you feel confident to teach:

Activity	✓	Activity	✓	Activity	✓
Archery		Arts & Crafts		Bible Study	
Nature Program		Canoeing		Sports	
Outdoor living		Drama		Sailing	
Swimming		Other (please explain)			

### Please check the position for which you are applying (you may apply for more than one position, if desired):

Position	✓	Position	✓	Position	✓
Program Director		Head Lifeguard		Office Manager	
Head Female Counselor		Lifeguard		Cook	
Head Male Counselor		Counselor		Kitchen	

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What makes a Christian camp different from other camps?

How have you seen God working in your life recently?

**Please provide two (2) references:**

Name	Address	Telephone Number

**Please check applicable certifications**

Certification	√	Certification	√	Certification	√
CPR		First Aid		Life Guard	
Canoeing		Other (please explain)			

**Applicants 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 working with children, youth or camp ministry. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive any right that I may have to inspect references provided on my behalf. Should my application be accepted, I agree to be bound by the bylaws and policies of Camp Medley and to refrain from any unscriptural conduct in the performance of my services. I will assist to the best of my ability in maintaining and further developing the ideals, Christian emphasis, academic standards and service requirements of this camp.

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please send to - Camp Medley Director,  
 c/o Shawn Branch, B-36 Cedar Street, St John, NB, E2k 1C7 by February 10<sup>th</sup>