

# 2017 Summer Staff Application



Name last			first			middle		
Date of Birth / /			Age at Camp			Gender		
S.S.# - -			Phone ( ) -			E-mail		
Address Street								
City			State			Zip		
Church you attend:								
Church's Address Street						Phone ( ) -		
City			State			Zip		

If applicant is a minor, please complete this section:

Parent/Guardian's Name:						Phone ( ) -		
Address Street								
City			State			Zip		

Position applying for: (check one)  Leader in Training (L.I.T.)  
 Junior Counselor  
 Collegian  
 Senior Counselor  
 Other: \_\_\_\_\_

Which weeks are you able to serve? (check all that apply)

- Stockade Adventure Camp
- July 2-8
- July 9-15
  
- Battalion Extreme Camp
- July 2-8
- July 9-15
  
- Girls Adventure Camp/Girls Expedition Camp
- July 23-29
  
- Father Daughter Camp
- July 19-22
  
- Father Son Camp
- June 28-July 1

Have you ever served at Camp K before? \_\_\_\_\_ If so, when and in what position(s)? \_\_\_\_\_

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Why do you want to serve at Camp K? \_\_\_\_\_

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Have you ever been convicted of a crime, other than a traffic violation? \_\_\_\_\_ If yes, please explain below.

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Please list any talents, skills, or previous experiences that you have that would benefit Camp K: (i.e. CPR certification, previous camping experience, archery instructor, rifle experience, etc.)

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Please put an "A" next to any of the following activities that you could assist in, or an "I" next to the ones that you think you could instruct:

\_\_\_ Archery

\_\_\_ Swimming

\_\_\_ Basketball

\_\_\_ Riflery

\_\_\_ Canoeing

\_\_\_ Soccer

\_\_\_ BB's

\_\_\_ Fishing

\_\_\_ Backpacking

\_\_\_ Paintball

\_\_\_ Camping Skills

\_\_\_ Other: \_\_\_\_\_

\_\_\_ Horsemanship

\_\_\_ Maintenance/Groundskeeping

Are you a lifeguard? \_\_\_\_\_ Certified by: \_\_\_\_\_

Date of Certification: \_\_\_\_\_ Date of Expiration: \_\_\_\_\_

Please give your employment history beginning with the most recent:

Company Name:	Dates Employed:
Supervisor's Name:	Phone:
Job Title:	Reason for leaving:
Job Description:	
Company Name:	Dates Employed:
Supervisor's Name:	Phone:
Job Title:	Reason for leaving:
Job Description:	
Company Name:	Dates Employed:
Supervisor's Name:	Phone:
Job Title:	Reason for leaving:
Job Description:	

**Please give 3 references, including at least one pastor.  
(No family members or previous employers)**

Name:	Relationship:	
Phone:	How long have you known them?	
Address Street		
City	State	Zip
Name:	Relationship:	
Phone:	How long have you known them?	
Address Street		
City	State	Zip
Name:	Relationship:	
Phone:	How long have you known them?	
Address Street		
City	State	Zip

**Please read and sign below:**

By signing below I certify that any and all information given in this document is accurate to the best of my knowledge.

I also certify that I understand the following:

1. False or misleading information given in this application or in any subsequent interviews may nullify this application and may disqualify me from employment at Camp Kaskitowa.
2. By submitting this application I have not been accepted for employment.
3. I am subject to further interview(s) by the Camp Director.
4. If I am accepted for employment I will be notified by the Camp Director in writing.
5. If accepted, my employment at Camp Kaskitowa may be terminated by the camp at any time
6. If accepted, my employment at Camp Kaskitowa is for the specified time period only as specified by the camp.

Applicant's Name: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**If applicant is a minor:**

Parent/Guardian Name: (please print) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please send the completed and signed application to:

Camp Director  
3799 108th Ave.  
Allegan, MI 49010

Thank you for your interest in serving at Camp Kaskitowa. I will notify you as soon as I have a chance to review your application. In the meantime, if you have any questions, please feel free to email me.

E-mail: [director@campk.net](mailto:director@campk.net)