

Camp Cherith® Southern California

Application for Volunteer Staff

Return to: Camp Cherith Southern California
P.O. Box 400610, Hesperia, CA 92340
After June 25, mail to:
P.O. Box 4703, Angelus Oaks, CA 92305

Name _____ Phone _____
Last First Spouse Include area code

Address _____
Street City State Zip

Work Phone _____ Cell Phone _____ Email: _____

Date of Birth: _____

Member of what church? _____ City _____

Church to be credited with your participation: _____

EDUCATION

Highest Grade completed _____ Degrees Earned: (AA,BA,MA...) _____ Major(s): _____

CURRENT EMPLOYMENT

Firm _____ Type of work _____

Accident/Illness Insurance Co. _____

Policy # _____ SS# _____

Drivers License # _____ State _____ Expires ____ / ____ / ____

Class A Class B Class C

PREVIOUS RESIDENCE(S) for last five years (including college and home residences)

Address _____
Street City State Zip

Address _____
Street City State Zip

Address _____
Street City State Zip

REFERENCES Personal references should be from those who have observed you in a position of leadership (include name, address and phone). No relatives please.

Pastor _____

Personal _____

Personal _____

POSITION DESIRED – See Position Summaries for descriptions. (available on internet website)

Cabin Counselor Lifeguard Activity Coordinator
 Tuck Shop Manager Cook Archery Cookout Crafts Outdoor Adv. Waterfront
 Secretary/Registrar Assistant Cook Mountain Bikes
 Nurse (RN/LVN/EMT) Kitchen Aide Van Driver

AGE GROUP PREFERENCES – Give both first (1) and second (2) choices.

___ 2nd Grade ___ 3rd – 4th Grades ___ 5th – 6th Grades ___ 7th – 8th Grades ___ 9th – 12th Grades

DATES Number of weeks for which you are applying? _____ Indicate specific week(s) you are available to come to camp. See Camp Information sheet for dates.

___ Week 1 ___ Week 2 ___ Week 3 ___ Week 4 ___ Week 5 ___ Any ___ Weekend(s)

Children coming to camp. Give name, grade in fall, week(s) attending.

PRE-CAMP TRAINING

Attendance at the Pre-Camp Training Weekend (see camp information sheet for dates) is a requirement for all Cherith staff. Any exceptions need to be approved by the Camp Director. Would you be able to attend?

CHRISTIAN EXPERIENCE -- please comment on each of the following:
Your relationship with Jesus Christ (when you became a Christian, etc)

Your interest in being a Cherith staff member (include strengths and possible contributions to the camp ministry).

Briefly comment on how the Lord has been working in your life during the past year:

**ALL STAFF please indicate any Current CERTIFICATION you hold.
Be sure to include expiration dates (*)**

___ ARC Community First Aid _____*
(includes Community CPR)

___ ARC Instructor _____*

___ Community CPR _____*

___ Child/Infant CPR _____*

___ CPR for the Professional Rescuer. Expires _____*

___ LVN ___ RN ___ EMT
License # _____

___ NAA Archery Certification _____*

___ NRA Certification _____*

___ Lifeguard _____*

___ WSI _____*

___ Willing to drive the camp vehicle (15 passenger van)
for activity assignment. Minimum age: 25.

___ Class B driver's license _____*
License # _____

___ **I DO NOT CURRENTLY HOLD ANY OF THE ABOVE CERTIFICATIONS.**

LIMITATIONS (attach separate sheet if necessary to explain answers)

1. Do you have any physical or mental limitations that would hinder your participation in camp activities?

Yes No If so, please explain:

2. Do you have any contagious or communicable diseases that may endanger others?

Yes No If so, please explain:

3. Have you ever been convicted of any crime involving child or sexual abuse, alcohol, drugs or an act of violence?

Yes No If so, please explain:

4. Have you ever been subject to any court order or judged liable for civil penalties involving child or sexual abuse, alcohol, drugs or an act of violence?

Yes No If so, please explain:

I understand that I may be denied a voluntary position based on the answers to the above questions and the information provided on this form is subject to verification, which may include a criminal history check and requests to any central registry of child abusers. A search of social networking websites may be conducted to obtain information on my character and suitability for volunteer positions.

I also understand that discovery of circumstances that would indicate different answers to the above questions may result in immediate removal from my volunteer position.

I have read the Statement of Faith and Personnel Policies and will adhere to them. I understand that being a volunteer Cherith staff member means serving . . . cooperating with the Director and other staff members as unto the Lord, supporting camp policies, sacrificing personal desires and sharing the reality of Jesus Christ as I live with others.

Date

Signature

Signature of Parent or Guardian (if applicant under 18 years of age)

CAMP CHERITH® SOUTHERN CALIFORNIA
P.O. BOX 400610
HESPERIA, CA 92340
(909) 866-9366

BETWEEN JUNE 25 AND AUGUST 1:
P.O. BOX 4703
ANGELUS OAKS, CA 92305
(909) 866-9366 Phone

Email: info@CampCherithCA.org
www.CampCherithCA.org