

# Application for Camp Cheerio 2012

NAME:	AGE:	SEX:	BIRTHDATE:
ADDRESS:	CITY/ST:	ZIP:	
CELL PHONE:	EMAIL:		

## All About You

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Where Do You Attend School: School: \_\_\_\_\_ Year: \_\_\_\_\_

Dates Available To Work: \_\_\_ Girls Camp (June 3 – July 7) \_\_\_ Coed Camp (July 8 – August 17) \_\_\_ Both

Any reason you would not be able to work all dates listed for time you are applying? \_\_\_ Yes \_\_\_ No

If yes please give reason: \_\_\_\_\_

Desired Job: \_\_\_\_\_

Any previous camp experience: \_\_\_\_\_ If yes, where?

Please describe any awards or special recognition you have received at work, school, or as a volunteer.

\_\_\_\_\_

Indicate any special skills and interests such as the arts, sports, aquatics, climbing, nature, or other.

\_\_\_\_\_

Please list any certifications AND expiration dates.

\_\_\_\_\_

Please tell us why you want work at a camp with children.

\_\_\_\_\_

Please list your past three employers with complete contact information.

Name of Supervisor	Place of Employment	Phone Number	Year(s) of Employment & Reason for Leaving

Please provide four completed references I can contact in this week, including one family member.

NAME	Relationship	Email Address	Phone Number

**Additional Information**

Some of the following questions may seem offensive or private; however, children deserve the best role models as their counselors. Since you would have a direct influence on their lives, we feel these are necessary questions.

Do you smoke? \_\_\_Yes \_\_\_No                      Use of other forms of tobacco? \_\_\_Yes \_\_\_No

Do you use alcoholic beverages? \_\_\_ No \_\_\_Rarely \_\_\_Occasionally \_\_\_Weekly

Have you ever been treated for a chemical dependence? \_\_\_ Yes \_\_\_No If yes, elaborate:

Have you ever been asked to leave or resign from a previous job held? \_\_\_Yes \_\_\_No If yes, elaborate:

Have you ever been convicted of a felony? \_\_\_ Yes \_\_\_No If yes, please elaborate with charge, year, and conviction.

Have you ever been convicted of any crime related to abuse or sexual acts of any nature? \_\_\_Yes \_\_\_No  
If yes, please elaborate:

**STATEMENT OF APPLICANT**

*In the High Point YMCA's effort to attract the highest quality staff, I understand that as a part of the application process for employment with the YMCA, an extensive inquiry will be made concerning my prior employment, activities, character and health, and I fully consent to and authorize all such inquiries. In the event of my employment by the High Point YMCA, I will comply with all policies set forth in the personnel manual and with other policies established from time to time by the organization. I authorize that YMCA to obtain a criminal history record check and request my employment record from any former employer(s). I further understand that inquiries may be made, concerning my background, experience and prior employment. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since they are made with my consent and it is in my interest that I be considered for employment. I understand that my continued employment may be contingent upon a criminal history background check. I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my being considered for employment or after employment, may be cause for termination of employment with the YMCA. I understand that the YMCA will take any allegations or suspicions of child abuse seriously and will report such allegations to the police and state agencies for investigation. I also understand that if hired as a YMCA employee or volunteer, I am not allowed to fraternize with YMCA youth members or participants outside the YMCA programs. I understand and agree that if I am employed, there is no contract period for employment and my employment would be solely an "employment at will" giving either me or the YMCA the right to terminate my employment at any time without liability or obligation except for my regular pay through the date of termination. I hereby acknowledge that I have read and understood the above statement and that I voluntarily sign this application.*

Please Type Name:

Date:

By typing of your name you have electronically signed this statement and will be held to its parameters.

We are an Equal Opportunity Employer, committed to valuing diversity and practicing inclusion.

PLEASE ATTACH A RESUME IF AVAILABLE.

Mail this application to: YMCA CAMP CHEERIO PO BOX 6258 High Point, NC 27262