



Application for 2010 Summer Staff
www.sonlightcamp.org
Phone: 970.264.4379 Fax: 970.264.4383
Sonlight Christian Camp
PO Box #536 Pagosa Springs, CO 81147

Name _____ Birth Date _____

Permanent Address _____

School Address _____

E-Mail Address _____ Male Female

Cell Phone # _____ / _____ Referred By _____

Personality

What are your passions?

List some things you love doing:

1. _____

2. _____

3. _____

What are your talents and strengths?

The following are my strongest abilities:

1. _____

2. _____

3. _____

What are some areas you would like to improve?

The following are some non-strengths:

1. _____

2. _____

3. _____

Self Portrait

This is how I see myself: (indicate one word for each comment)

1. Around others I am more: RESERVED OUTGOING

2. My decisions are based more on: FACTS/THINKING FEELING

3. In relationships I tend to be more: DEPENDENT ON OTHERS INDEPENDENT

4. My use of time is more: SCHEDULED SPONTANEOUS

Education

Name of College/University _____ Major/Degree _____

Years Completed of College _____ Name of High School _____

College GPA _____ High School GPA _____ Years Completed of High School _____

Networking

Social Networking Site(s) (Myspace, FaceBook, etc.) _____

Networking Site(s) User Name(s) _____

(continued) _____

May we contact you using the above listed sites? Yes No

Lifestyle Questions

Have you ever been convicted of a crime(s)? _____

Do you currently use alcohol or illegal drugs? _____

If Yes, what drug or alcohol? _____ Frequency of use? _____

Certifications

I hold current certification in, or am licensed as:

- | | | |
|---|--|---|
| <input type="checkbox"/> CPR | <input type="checkbox"/> Lifeguard | <input type="checkbox"/> Registered Nurse |
| <input type="checkbox"/> Wilderness First Aid | <input type="checkbox"/> Archery | What State? _____ |
| <input type="checkbox"/> Wilderness First Responder | <input type="checkbox"/> Ropes Course Facilitation | |
| <input type="checkbox"/> EMT | <input type="checkbox"/> Other _____ | |

Do you have a CDL? (Commercial Drivers License) Yes No

Can you drive a manual transmission vehicle (4 or 5 speed)? Yes No

Skills and Activities

How competent are you LEADING the following activities? (1 being "I've Never Heard of This", 5 being "Rock Solid")

Climbing Wall _____ Archery _____ Low Ropes Course _____ Mountain Biking _____ Soccer _____

Dodgeball _____ Geocaching _____

If TRAINED, I would feel confident LEADING the following activities. (Use the same scale as above)

Climbing Wall _____ Archery _____ Low Ropes Course _____ Mountain Biking _____ Geocaching _____

What Position(s)?

After reading the job descriptions for the following positions, please check those you'd like to be considered for:

Summer Camp Positions

- | | |
|---|--|
| <input type="checkbox"/> Head Cook | <input type="checkbox"/> Program Leader |
| <input type="checkbox"/> Assistant Cook | <input type="checkbox"/> Videographer |
| <input type="checkbox"/> Camp Nurse | <input type="checkbox"/> Counselor/Program Support |

Tell Us About Yourself *(Use additional space as necessary)*

Previous work experience

Dates MM/YY-MM/YY	Company/Organization	Employer/Supervisor's Name	E-Mail or Phone # of Employer/Supervisor	Date Verified by Sonlight Camp <i>(Office Use Only)</i>

How did you hear about Sonlight Christian Camp?

- Website
 Web Search Engine
 Friend _____
 Former Camper

I authorize investigation of all statements herein and release the camp and all others from liability in connection with the same. I understand that untrue, misleading or omitted information herein may result in dismissal regardless of the time of discovery by the camp. I authorize the release of any information about me from my listed references. I understand that I will have to complete a background check, a driver's license check, and, if hired, will need a physical examination before starting work to comply with Colorado law. I affirm that I have never been convicted of any charge of child abuse or neglect, unlawful sexual offense, or any felony.

“Any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in Section 18-8-503 C.R.S., and upon conviction thereof, shall be punished accordingly.”

Applicant's Signature _____ Date _____

If Under 18, Parent or Guardian's Signature Required

Parent/Guardian _____ Date _____