

GEORGIA LIONS CAMP INC.

5626 Laura Walker Road, Waycross, GA 31503 | E-Mail: director@glcb.org | Website: www.glcb.org
Telephone: (912) 283-4320 | Fax: (912) 283-5130

STAFF / VOLUNTEER APPLICATION

Check One: Camp Staff Volunteer **Date of Application:** _____

Name: _____ Social Security #: _____

Permanent Address: _____
Street City State Zip

Phone: _____ Email: _____

Current Address: _____
Street City State Zip

Gender: Male Female **DOB:** ___/___/___ **Age:** _____ (Must be 18 yrs. of age)

Mail should be sent to: Permanent Address Current Address

Race/Ethnicity

Caucasian/White Bi-Racial/Multi-Racial American Indian Native Hawaiian/Pacific Islander
 Black/African American Asian Hispanic/Latino Other _____

School/College Attending _____ Major _____

Referencing the current summer schedule, please indicate any dates that you would be unavailable for work:

I am available from date beginning to date end: _____

For which camp position(s) are you applying? (*Certification(s) required)

Program Director Cabin Leader Music/Drama Leader * Driver
 Games Leader Quartermaster Cook *Camp Nurse
 Kitchen Supervisor Arts & Crafts Leader Nature * Canoe Leader
 Maintenance Assistant General Counselor * Lifeguard * Ropes Course

What certification(s) do you currently hold? (Please include expiration dates)

First Aid ___/___/___ Lifeguard ___/___/___ Canoeing ___/___/___
 CPR ___/___/___ WSI ___/___/___ Ropes Course ___/___/___
Driver's License # _____ State Issued: _____ Expiration Date ___/___/___

List any course(s), which you have had, or training that would be of benefit to the position(s) for which you are applying:

Child Psychology, Cultural Competence, Psychology, Sociology:

List school, community, and other activities in which you participate, and position of leadership held:

Place a check next to those activities you would be able to lead or teach others:

Challenge Course Backpacking Canoeing Music Environmental Education
 Team Games Arts & Crafts Fishing Drama Sign Language (ASL)
 Swim Instruction Outdoor Living Skills List Other: _____

Do you have any experience working with persons whom are mentally disabled? Yes No
 Do you have experience working with persons whom are physically disabled? Yes No
 Are you a U.S. Citizen and/or legally eligible for employment? Yes No
 Are you willing to work with both children and adults? Yes No
 Have you been convicted of a crime or felony? Yes No
 Are you fluent in a foreign language? Yes No

How did you become aware of the position(s) available at Georgia Lions' Camp? Newspaper Internet GLCB Employee
 Job Fair Friend/Family Member Lions Club Member Career Service Center Other:

Give an "employee profile" of yourself. Give five words or phrases, which best describes the type of worker you are, and your work habits.

What three factors would you choose as being your main strengths in performing the position for which you have applied.

EMPLOYMENT & EXPERIENCE REFERENCES - Indicate your most recent volunteer, student teaching, clinical/field experience in addition to paid positions you have held.

(1.) Employer _____ Supervisor _____
 Address: _____
Street City State Zip

(2.) Employer _____ Supervisor _____
 Phone (_____) _____ Address _____
Street City State Zip
 Position Held _____ Dates Employed _____ to _____ Paid Volunteer

(3.) Employer _____ Supervisor _____
 Phone (_____) _____ Address _____
Street City State Zip
 Position Held _____ Dates Employed _____ to _____ Paid Volunteer

REFERENCES: (References from friends and relatives will not be considered.) May we contact your enclosed references? Yes No

(1.) Name _____ Phone: _____ # years known _____
 Relationship to Applicant: _____ Address: _____

(2) Name _____ Phone: _____ # years known _____
 Relationship to Applicant: _____ Address: _____

(3.) Name _____ Phone: _____ # years known _____
 Relationship to Applicant: _____ Address: _____

(Please include a copy of your résumé or brief biographical sketch. Include any specialized training, interests and hobbies you may have.)
 All staff must have had a physical exam within the past two years and a tetanus shot within the past 10 years. It is suggested that all staff be immunized with the Hepatitis vaccine.

I have read the job description and understand what is required of a Georgia Lions' Camp Staff Member. I feel I can cope with the responsibilities of caring for campers with special needs. I authorize investigation of all statements herein, including references. I release the camp and all others from liability in connection with same. I understand that untrue, misleading, or omitted information herein may result in dismissal, regardless of time or discovery by the camp.

If I am employed, I agree to read and comply with the Georgia Lions' Camp Rules, regulations, and policies. I understand that if hired, I will be expected to participate in all Camp programs and activities.

Applicant's Signature _____ **Date** _____