

CAMP FATIMA & CAMP BERNADETTE

P.O. BOX 206 GILMANTON IW., NH 03837-0206

603-364-5851

info@diocamps.org

Please print or type clearly. Use additional paper as needed and attach to this form.

BE SURE TO COMPLETE EVERY SECTION AS REQUESTED.

PERSONAL INFORMATION

Full Name _____

Date of Birth ____/____/____

Gender Female/Male

Social Security # _____

Permanent Address _____

Phone Number (____) _____

Dates you can be reached at this address _____

What School/College are you presently enrolled in? _____

Year you are now in:

High School: Grade ____ *College:* Year ____ *Graduate School:* Year ____

College Address _____

Phone Number (____) _____

Dates you can be reached at this address _____

E-mail Address _____

EMPLOYMENT INFORMATION

Position you are applying for: _____

Have you previously been employed by this camp? Yes/No

If yes, what positions have you held (please give dates).

Were you a camper at this camp? _____ Dates _____

Have you ever been employed by the Diocese, any Catholic parish or school, or other Catholic agency? Yes/No Where and when? _____

EMPLOYMENT: (Please list your last 3 jobs, providing full employer address, phone number, name of supervisor, position and major job responsibilities)

1 _____

2 _____

3 _____

REFERENCES: (Please provide full names, addresses, phone numbers and relationship of 3 references. They may not be relatives)

1 _____

2 _____

3 _____

SKILLS

List activities you have participated in (professional, social, school, community, and church...)

In what program area of camp are you interested?

WATERFRONT

Rate your swimming ability:

___ Excellent ___ Good ___ Fair ___ Poor ___ Nonswimmer

Rate your ability to teach the following: (5=Excellent 3=Good 1=Fair)

___ Sailing ___ Rowing ___ Canoeing
___ Kayaking ___ Fishing ___ Swimming Classes
___ Other (please list) _____

Courses you have completed.

	Expires
___ Lifeguard	_____
___ Water Safety Instructor	_____
___ First Aid	_____
___ CPR	_____
___ First Responder	_____
___ Wilderness First Aid	_____
___ Small Craft Safety	_____
___ Small Craft Instructor	_____
___ Other (please list)	_____
_____	_____
_____	_____

Do you have a valid commercial boating license for the state of New Hampshire? Yes/No
Exp Date _____

SPORTS

Rate your ability to teach the following: (5=Excellent 3=Good 1=Fair)

___ Archery ___ Baseball ___ Basketball
___ Floor Hockey ___ Riflery ___ Soccer
___ Tennis ___ Hiking ___ Martial Arts
___ Volleyball ___ Ropes (low/high) ___ Track & Field
___ Football ___ Lacrosse ___ Racquetball
___ Ultimate Frisbee ___ Arts & Crafts ___ Photography
___ Acting/Drama ___ Radio/DJ ___ Video Production
___ Climbing Wall ___ Other (please list) _____

List any other qualifications/certifications you have.

Qualification	Expires
_____	_____
_____	_____
_____	_____
_____	_____

List any other skills and/or attributes you have that you feel will be beneficial to camp.

YOUR PERSONALITY

Please answer the following questions.

What are your strongest qualities? _____

What personal characteristic would you like to improve? _____

How would you describe yourself to someone who didn't know you? _____

What do you perceive to be the biggest responsibility of a staff member? _____

What is the most important thing you would like campers to learn from you at camp? _____

Please describe any experience you have had with children, include ages and responsibilities. _____

Please describe any leadership experience you have had. _____

What do you anticipate your greatest challenge at camp to be? _____

Why do you think you should be employed by Diocesan Camps? _____

GENERAL INFORMATION

Are you able to commit to a full 9 weeks of employment with Diocesan Camps? Yes/No
If no, Why not? _____

Have you read and understood the Camp philosophy? Yes/No

If offered employment, can you submit verification of your legal right to work in the United States? (Birth Certificate, Passport, Driver's License...) Yes/No

Employment Application Agreement:

The facts set forth in my application for employment are true and complete. I understand that if I am employed, any false statements on this application will be considered sufficient cause for dismissal. I understand that if I am hired, I can be terminated at any time, with cause, with or without notice.

Applicant's Signature _____ **Date** _____
Printed Name _____

Parent Signature is required for all staff who are under the age of eighteen as of the first day of camp.

Parent Signature _____ **Date** _____

The Diocesan Camps will interview all applicants
You will be notified when and where your interview will be held.

Are you available to travel to the Camp Office? Yes/No

CONSENT FORM

In the Diocesan Camp's effort to attract the highest quality of staff, I have been advised that as part of the application process for employment with the Diocesan Camps, an extensive inquiry will be made concerning my prior employment, activities, character and health, and I fully consent to authorize all such inquiries.

In the event of my employment by the Diocesan Camps, I will comply with all the policies set forth in the Staff manual and with other policies established from time to time by the organization.

I will submit to the camp a current physical examination report that has been done by a licensed physician showing me to be fit for duty as a camp staff member and free of contagious diseases.

Additionally, I authorize the Diocesan Camps to request my employment record from any former employer(s). I further understand that inquiries may be made concerning me, my background, experience and prior employment. You or your representatives may make inquiries or requests to any governmental agency, including law enforcement agencies or departments, or any other party with a legal and proper interest. 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 my interest that I be considered for employment.

I certify that statements made by me on this application are true and complete 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 with the Diocesan Camps.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENTS AND THAT I VOLUNTARILY SIGN THIS APPLICATION.

Signature of Applicant

_____ Date _____

