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| **2017**  **Camp Luther Staff Application** | | **C:\Users\LUTHER\Desktop\Camp Luther 2011\Shirt Pics\Camp Logo 1.png** | |
| **Please complete and email (or USPS mail) to director by March 1, 2017. Make a copy for your records.** | | | |
| **Date of Application:** | | | |
| **Name (Last)** | **Name (First)** | **Date of Birth** | |
| **Phone:** | **Email:** | **T-Shirt Size** | |
| **Mailing Address:** | | | |
| **City:** | **State:** | **Zip:** | |
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| **Have you taken *Safeguarding God’s Children?***  **Where:**  **When:**  **\*Please bring or email a copy if not already on file** | | **Certified in First Aid?**  **Yes** or **No** | |
| **Where you attend church**  **Name of Pastor:**  **Church Name:**  **Church Address: Phone:** | | | |
| **Please explain in one sentence why you want to serve at Camp Luther.** | | | |
| **What would be the greatest strength that you would share with Camp Luther?** | | | |
| **In what ways are you involved in the worship and/or ministry of your church or explain your involvement in any church related and religious activities?** | | | |
| **For staff, Camp Luther 2017 begins on Saturday, 17 June and ends on Saturday, 24 June. It is very important that all staff attend pre-camp (17 June) as this is the final planning stage prior to the campers’ arrival.** It is also important that all staff remain at camp until 24 June as there is much work to be done to clean-up/close down. Although it is not required that everyone be there the entire week, the need to arrive late or depart early will be considered a discriminator when determining staff. | | | ***Will you be able to attend the entire week of camp? (please circle)***  **Yes**  **No (if “No” please explain in Explanation Box at end of application)** |

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| Below are the available staff positions. Please select up to five positions you would be willing to serve. Enter them in the table below with your first priority listed in #1 and so on. Also, if you have a reason you think you’re a good fit for a particular job (e.g. you have a music degree and want to be a music teacher or you have a child psychology degree and want to be part of the medical staff), please let me know in the Explanation Box at the end of the application.  \*\*Note: You will only be considered for positions you select. | | |
| |  |  |  | | --- | --- | --- | | Program Positions | Functional Staff Positions | | | Junior Teacher | Newspaper | Teachers: | | Junior Counselor | Medical | Crafts | | Junior Swimming Instructor | Office Manager | Creative Arts | | Intermediate Teacher | Business Manager/Treasurer | Nature | | Intermediate Counselor | Contingency (performs various tasks as needed throughout the week) | Music | | Senior Teacher | Media | Sports | | Senior Counselor |  |  | | | |
| **My Staff Preferences** | | |
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| Have you ever been discharged or forced to resign from employment or a volunteer role? | | Yes or No |
| If yes, please give the details, including the name of the employer or group. | | |
| Have you ever been convicted of a crime or are you under charges for any offense against the law, other than minor traffic violations? | | Yes or No |
| If yes, please give the details. | | |

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| **If you are new to the Camp Luther staff, please list three references.** *Please ask your references for permission to use their names. At least one reference should be a member of your church. Letters from all references will be required for new applicants. Send them with you application or, if you are submitting online, as soon as possible.* | | |
| 1. **Name:** | | |
| **Address:** | | **Phone:** |
| 1. **Name:** | | |
| **Address:** | | **Phone:** |
| 1. **Name:** | | |
| **Address:** | | **Phone:** |
|  | | |
| CERTIFICATION (Please read this statement carefully before signing!)    *I hereby certify that my answers to the above questions are true, complete, and correct. I understand that false answers on this application may be grounds for immediate dismissal from Camp Luther. I also understand that the above answers are subject to verification.*  *By entering your name below you have confirmed that you agree and understand the statement above.* | | |
| **Signature:** | **Date:** | |
| **Please return this application NLT 1 March 2017 to:**  [**Director@camplutherwv.com**](mailto:Director@camplutherwv.com) **or Camp Luther Director**  **c/o Faith Lutheran Church**  **PO Box 893**  **Franklin, WV 26807** | | |

**Explanation Box (If needed. Please include anything you believe merits explanation):**