

OWAISSI ANGLICAN CAMP ASSOCIATION SUMMER STAFF APPLICATION

Email: campowaissi@hotmail.com

Visit our website: www.campoac.com

Please attach resume and all three pages of this application and return by email to guarantee it has been received.

| APPLICANT INFORMATION (PLEASE LIST ALL DATES AS DD/MM/YY) | | | |
|---|----------------|------------------|-----------|
| Last Name | First | M.I. | Birthdate |
| Street Address | | Apartment/Unit # | |
| City | Province | Postal Code | |
| Phone | E-mail Address | | |
| Are you authorized to work in Canada? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Have you ever worked for Camp Owaissi? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when? | | | |
| Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain | | | |

| EDUCATION (PLEASE LIST ALL DATES AS DD/MM/YY) | | | | |
|--|----|-------------------|--|--------|
| High School | | Address | | |
| From | To | Did you graduate? | YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| College | | Address | | |
| From | To | Did you graduate? | YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| Other | | Address | | |
| From | To | Did you graduate? | YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |

Job(s) interested in applying for (Check all that you are interested in)

| | | | |
|---------------------------------------|---|--|---|
| <input type="checkbox"/> Drama Leader | <input type="checkbox"/> Crafts Leader | <input type="checkbox"/> Sports Leader | <input type="checkbox"/> Waterfront Coordinator |
| <input type="checkbox"/> Lifeguard | <input type="checkbox"/> Assistant Cook | <input type="checkbox"/> Cabin Leader | <input type="checkbox"/> Head Cook |

Are you certified in any of the following:

| | | | |
|---|-----|----|-----------------------|
| First Aid | Yes | No | Expiration Date _____ |
| CPR | Yes | No | Expiration Date _____ |
| Lifeguard | Yes | No | Expiration Date _____ |
| Food Safe | Yes | No | Expiration Date _____ |
| Any other certifications with expiration dates: _____ | | | |

| PREVIOUS EMPLOYMENT (PLEASE LIST ALL DATES AS DD/MM/YY) | | | |
|---|------|--------------|--|
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | From | To | |
| Responsibilities | | | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> Reason for Leaving | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | To | From | |
| Responsibilities | | | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> Reason For Leaving | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | To | From | |
| Responsibilities | | | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> Reason for Leaving | | | |

Will you be returning to school in September of 2012? Yes No

| REFERENCES | |
|--|--------------|
| <i>Please list three references. One spiritual, one character, and one professional.</i> | |
| Full Name | Relationship |
| Company | Phone () |
| Email | |
| Full Name | Relationship |
| Company | Phone () |
| Email | |
| Full Name | Relationship |
| Company | Phone () |
| Email | |

By signing below, I am indicating all above information is accurate and I am free of any pending criminal charges or convictions precluding me from working with children. I also understand Camp Owaissi requires a Criminal Record Search that will be paid for and submitted by the Camp Owaissi Association. I give permission to Camp Owaissi to run a Back Check on my criminal record or agree to submit one if and when asked.

Signature

Date

ACTIVITY EXPERIENCE

Use the following scale to rate your experience level for the following activities:

1= No Experience 2= Little Experience 3= Some Experience 4= Lots of Experience 5= I'm a Pro

| | | | | | |
|-----------------|--|--------------------------|--|-------------|--|
| Sports | | Music: Guitar | | Canoeing | |
| Outdoor Games | | Music: Singing | | Kayaking | |
| Arts and Crafts | | Music: Other Instruments | | Swimming | |
| Drama Games | | Planning Worship | | Photography | |

List all sports teams, clubs, organizations, and non-sport teams you have been involved in: _____

List any leadership positions you have held: _____

List any experience you have working with children: _____

List any certifications you currently have and expiration dates (i.e. lifeguard, CPR, Food Safe, etc.) _____

IN YOUR OWN WORDS (Please use additional paper to answer the following questions)

1. What gifts do you possess that you will share with campers at Owaissi?
2. Why are you choosing to make Camp Owaissi part of your summer?

Shirt Size (In Adult Sizes): X-Small Small Medium Large X-Large XXL