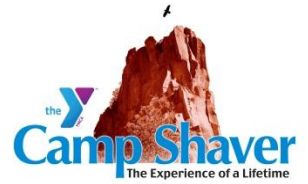


Applicant name _____



YMCA Camp Shaver Staff Application

Please print or type your answers. Application will not be valid if any questions remain unanswered.

Full Legal Name _____ Nickname: _____

Address _____ Phone # _____

Email address _____ Best way to reach you? _____

Social Security # _____ Please circle how old you will be as of June 1st: 17 18 19 20 21 22+

Driver's License: State _____ Number _____ Expiration _____

If applicable, what year of high school or college are you in currently? _____

Major/Degree _____ Career Goal _____

Realizing that camp counseling often involves extensive physical outdoor activity, is there anything that would prevent you from doing the job? Yes ___ No ___ If yes, please explain _____

Please answer the following questions as thoroughly as possible. If necessary, attach a separate sheet of paper.

What positive impact will you make on the Camp Shaver community, including campers, parents, and fellow staff members? _____

How can working at Camp Shaver help you further your educational, career, and life goals? (In other words, what will YOU get out of it?) _____

What experience do you have working with children? _____

Please explain your concept of customer service as it relates to camp. _____

Applicant name _____

What are some traits and actions of a good role model? _____

Who are three of your heroes, and why? _____

Camp has several rental groups and school programs in the spring and fall. Please list dates you are available to work before or after the summer season. _____

Please list any current certifications you hold, and their expiration dates. (CPR, WFR, High Ropes, etc.) _____

If you do not currently hold a recognized CPR and First Aid certification, are you able to attain it before camp? _____

Please rank the activity areas below using the following scale:

1. Highly skilled; can instruct a class, set up lesson plans, demonstrate proficiency, organize and/or supervise
2. Moderately skilled; can operate a safe program, teach competently and confidently without guidance
3. Moderate knowledge/experience; could assist an instructor
4. Very limited or no knowledge

Archery	Tree identification	Teambuilding	Singing
BB Guns	Geology	Group games	Engine repair
Slingshots	Outdoor cooking	Rock climbing	Arts and Crafts
Soccer	Survival skills	High ropes course	Fishing
Baseball	No-trace camping	Lifeguarding	Dance
Basketball	Hiking	Woodworking	Storytelling
Football	Backpacking	Computers	Guitar or ukulele
Lacrosse	Recycling	Photography	Piano
Gardening	Map and Compass	Pottery	Drumming
Environmental education	Pioneer living	Drama/Theater	Other:
Insects	Leatherworking	Rafting	Other:
Astronomy	Jewelry-making	Creative writing	Other:

What three activities listed above would you be most interested in teaching at camp, and why?

1. _____

2. _____

3. _____

Applicant name _____

Employment History		
Location	Job Title	Dates
Supervisor name and phone #		Reason for leaving
Location	Job Title	Dates
Supervisor name and phone #		Reason for leaving
Location	Job Title	Dates
Supervisor name and phone #		Reason for leaving

YMCA Camp Shaver’s objective is to be a strong positive influence on campers who are developing their personal habits and values. A counselor’s example is most important in achieving this objective. Accordingly, do you understand and are you committed to abide by YMCA Camp Shaver’s expectations that counselors will refrain from the use of illegal drugs in any form, tobacco, and the indiscriminate use of alcoholic beverages after age 21? Do you also understand the necessity of maintaining good personal habits of conduct, grooming and hygiene?

Yes _____ No _____

Do you use tobacco in any form? _____ If yes, can you restrict your usage only to “time off”? _____
Do you drink alcoholic beverages? _____ Can you comply with camp’s expectations regarding this? _____

I attest that the information provided in this application is accurate to the best of my knowledge and I have not willfully left out any information which could affect a decision to hire me. I want to work at Camp Shaver for no other reason(s) than described above. If hired I will perform the duties assigned to me willingly and cheerfully and will to the best of my ability protect and enhance the good reputation of YMCA Camp Shaver and the YMCA of Central New Mexico.

Signed _____ Date _____

If you are under 18, a parent or guardian must sign for you.
I agree to have my child work at YMCA Camp Shaver under the prescribed conditions.

Parent Signature. _____ Date _____

References

Please provide the names and email addresses of at least three references. Reference forms will be made available to them online and must be completed as soon as possible.

Name _____ Email address _____
Relationship to applicant _____ Years known _____

Name _____ Email address _____
Relationship to applicant _____ Years known _____

Name _____ Email address _____
Relationship to applicant _____ Years known _____

**Please return completed application by email to info@campshaver.org or to
YMCA Camp Shaver, 303 Roma NM, Ste. Rb00A, Albuquerque, NM 87102**

**YMCA CAMP SHAVER DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION,
AGE, GENDER IDENTITY, SEXUAL ORIENTATION, OR NATIONAL AND ETHNIC ORIGIN.**