



YMCA CAMP PEPIN

APPLICATION FOR SEASONAL EMPLOYMENT



FOR OFFICE USE ONLY	
Application Rec'd _____	Position _____
References Rec'd (3) _____	Employment Dates _____
Interview _____	Hiring Packet Sent _____
Hiring Code _____	Hiring Packet Rec'd _____

Please type or print in black or blue ink.

BACKGROUND INFORMATION

Name _____
First Middle Last

Present Phone (_____) _____ Cell Phone (if different) (_____) _____

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Permanent Phone (_____) _____ I will be at my present address until _____

Email Address _____ Are you legally entitled to work in the U.S.? Yes / No

How did you find out about Camp Pepin? _____

EMERGENCY CONTACT

Name _____ Relationship _____
First Last

Address _____
Street City State Zip

Home Phone (_____) _____ Business Phone (_____) _____

EDUCATION

High school grade completed: 9 10 11 12

College year completed: 1 2 3 4

	Name	City / State	Entered Mo/Yr	Left Mo/Yr	Degree / Major
High School					
College / University					
College / University					

STAFF POSITIONS

Please number in order of preference (1,2,3, etc.) the positions for which you would feel qualified and would like to apply. Leave blank all other positions.

_____ Resident Counselor	_____ Target Sports Director
_____ Assistant Counselor	_____ Arts & Crafts Director
_____ Camp Office Assistant	_____ Food Service Director
_____ Program Director	_____ Food Service Assistant
_____ Challenge Course Director	_____ Kitchen Assistant
_____ Waterfront Director	_____ Intern
_____ Boating Director	_____ Outdoor Education Instructor
_____ Leadership Director	_____ Health Care Coordinator
_____ Trail Director	

SKILLS

Please indicate the skills that you could either teach (T), assist (A), or would like to learn (L) by circling the appropriate letter. Leave blank all other skills.

Adventure/Challenge

Climbing	T	A	L
High/Low Ropes	T	A	L
Team-Building	T	A	L

The Arts

Arts & Crafts	T	A	L
Dance	T	A	L
Drama/Skits/Theatrics	T	A	L
Music	T	A	L

Outdoor/Campcraft

Backpacking	T	A	L
Biking	T	A	L
Camping	T	A	L
Fishing	T	A	L
Horseback Riding	T	A	L
Nature/Earth Discovery	T	A	L
Orienteering	T	A	L
Outdoor Cooking	T	A	L
Pioneering	T	A	L
Rafting	T	A	L

Special Interests

Foreign Language	T	A	L
Information Technology/Computers	T	A	L
Sign Language	T	A	L

Sports/Fitness

Basketball	T	A	L
Cross-Country Skiing (Winter)	T	A	L
Field Sports (Soccer, Volleyball, etc.)	T	A	L
Gymnastics	T	A	L
Martial Arts	T	A	L
Snowshoeing (Winter)	T	A	L
Target Sports (Archery, Riflery)	T	A	L

Waterfront

Canoeing	T	A	L
Kayaking	T	A	L
Motorized Boating	T	A	L
Sailing	T	A	L
Swimming	T	A	L

Use the space below to briefly describe your experience in the skills marked with a "T" or an "A" above, and to explain other skills that you wish to share. Continue onto another sheet if necessary.

CERTIFICATIONS

Please indicate any certifications you currently possess (and their expiration dates, if applicable), or would be earning prior to employment. Leave blank all other certifications.

Type of Certification	Expiration Date	Type of Certification	Expiration Date
_____ Archery Instructor	_____	_____ EMT/LPN/RN	_____
_____ Boating Safety Instructor	_____	_____ Outdoor Living Skills	_____
_____ CPR	_____	_____ Riflery Instructor	_____
_____ First-Aid	_____	_____ Ropes Course Instructor	_____
_____ EMT	_____	_____ Water Safety Instructor	_____
_____ Horsemanship Assn.	_____	_____ Wilderness First Aid	_____
_____ Hunter Safety	_____	_____ Wilderness First Responder	_____
_____ Lifeguard	_____	_____ Other: _____	_____

REFERENCES

Your application must be accompanied by three (3) reference forms, which may be submitted by postal mail or online through our website (www.camppepin.org/employment.htm). Please read over the information on the forms before distributing them. Each form should be completed and returned directly to YMCA Camp Pepin by the person making the reference. We recommend employers, teachers, ministers, coaches, or other persons who can give an honest character reference. References by personal friends or relatives will not be considered.

Please list the name, relationship, and phone number of the persons who will be providing your references.

	Name	Relationship	Phone Number
1.			
2.			
3.			

It is important that your references be submitted as soon as possible. YOUR APPLICATION CANNOT BE CONSIDERED UNTIL ALL THREE REFERENCES ARE RECEIVED.

QUESTIONS

To help us get to know you better, please answer the questions below. An additional sheet may be used to answer any of the questions, if desired.

1. Why are you interested in camp work?
2. What strengths do you feel you would be able to contribute to our program?
3. What are some of the reasons you think parents send their children to camp?
4. What life skills do you believe children and staff can learn in a camp setting?
5. Have you ever been convicted of a felony, misdemeanor, child abuse, or sexual abuse offence? **Yes / No**
If yes, please indicate the conviction(s), dates, and circumstances.

WORK EXPERIENCE

Please list previous employers beginning with the most recent.

Employer/Company _____ Supervisor _____

Address _____

Telephone (_____) _____ Your Position _____

Dates Employed _____ to _____ Reason for Leaving _____

Employer/Company _____ Supervisor _____

Address _____

Telephone (_____) _____ Your Position _____

Dates Employed _____ to _____ Reason for Leaving _____

Employer/Company _____ Supervisor _____

Address _____

Telephone (_____) _____ Your Position _____

Dates Employed _____ to _____ Reason for Leaving _____

I certify that the information provided in this application for employment is true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. I also understand that employment with the Red Wing Family YMCA is subject to passing a criminal background check and child abuse screening; therefore, I authorize the YMCA to conduct a police record check and child abuse screening, and to make any investigation of my prior educational and work history. I furthermore understand that if I am hired, my specific responsibilities, as set forth in my job description, will be subject to periodic evaluation by my supervisor(s), and the length of my employment is not guaranteed. Recognizing that I will be free to voluntarily terminate my employment with the YMCA at any time with or without cause, I acknowledge that the YMCA is an at-will employer and is free to terminate my employment at any time with or without cause.

Signature _____ Date _____

Parent's/Guardian's Signature (if under 18) _____ Date _____

RETURN TO:

<p style="text-align: center;"><i>Camp Address:</i></p> <p>YMCA Camp Pepin c/o Camp Director W10915 East Lake Dr. Stockholm, WI 54769</p> <p>Phone: (715) 442-3811 Fax: (715) 442-9061</p>	<p style="text-align: center;"><i>Downtown Address:</i></p> <p>Red Wing Family YMCA c/o Camp Director 434 Main Street Red Wing, MN 55066</p> <p>Phone: (651) 388-4724 Fax (651) 388-5340</p>
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**email: camp@redwingymca.org
website: www.camppepin.org**