



# Girl Scouts of Utah Seasonal Camp Staff Application 2012

## Personal Information

First Name: _____		Last Name: _____	
Present Address: _____			
Permanent Address: _____			
Present Phone Number: _____		Is this a cell phone? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Permanent Phone Number: _____		Is this a cell phone? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Best time of day to reach you by phone: _____		Email Address: _____	
Age (on or before June 11, 2012): <input type="checkbox"/> Under 18 <input type="checkbox"/> 18-20 <input type="checkbox"/> 21-24 <input type="checkbox"/> 25+			

## Preferences

<p style="text-align: center;"><b>Position Desired *</b></p> <p style="text-align: center;">(select up to 3 choices, in order of preference)</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p><small>*Please see the 2012 Summer Camp Employment Brochure or go to <a href="http://www.gsutah.org">www.gsutah.org</a> and click on "camp" for list of positions.</small></p>	<p style="text-align: center;"><b>Camp Preference</b></p> <p>_____ Trefoil Ranch, located near Provo. Employment dates are June 11-August 11, 2012*</p> <p>_____ Camp Cloud Rim, located near Park City. Employment dates are June 18-August 11, 2012*</p> <p>_____ No preference, they're both fantastic!</p> <p><small>*Please note some positions may start work earlier and/or end later. A typical work week is Monday morning through Saturday afternoon. All positions require staff to live on site.</small></p> <p>Are there any dates you are <b>NOT available</b> for work? <small>*Please list: _____</small></p>
<p style="text-align: center;"><b>Source of Referral</b></p> <p>Where did you hear about GSU Summer Camps?</p> <p>Former Camp Employee (name): _____</p> <p>Website (name): _____</p> <p>Newspaper (name): _____</p> <p>Job Fair (where): _____</p> <p>Other: _____</p>	

## Personal Statements

**Please attach your answers on a separate sheet of paper. This section must be completed for your application to be considered.**

1. Why are you applying to work at camp this summer?
2. How do you think a camping experience can benefit a child?
3. Please elaborate on any experience and training (in camping, Girl Scouting, and working with youth) that you have had that would enable you to be successful in the position for which you are applying.
4. What kinds of experiences have you had working with others with different backgrounds than your own including: color, culture, religion, sexual orientation, socio-economic status, and age. Please be specific and include at least three of the categories listed in your answer.
5. How will you help to create a positive working community at camp?

## Education

	High School or General Equivalency Diploma (GED)	Undergraduate College/University	Other
School Name and Location (City, State)	Name: _____ Location: _____	Name: _____ Location: _____	Name: _____ Location: _____
Last Year Completed (as of June 2012)	<input type="checkbox"/> Freshman <input type="checkbox"/> Junior <input type="checkbox"/> Sophomore <input type="checkbox"/> Senior	<input type="checkbox"/> Freshman <input type="checkbox"/> Junior <input type="checkbox"/> Sophomore <input type="checkbox"/> Senior	
Diploma/Degree/Credits			
Major/Area of Study			
List courses you have taken that are related to the position for which you are applying			
Are you currently a full-time student?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

### Work/Volunteer Experience

#### Previous Youth or Outdoor Recreation Experience – Paid or Volunteer

Name of Employer/Organization		Title or Position	
Address	City, State	Zip Code	Area Code & Phone Number (    )
Employment Dates (Month & Year) From:                      To:	Name & Title of Immediate Supervisor		Email Address to HR/Immediate Supervisor
Reason for Leaving			

Name of Employer/Organization		Title or Position	
Address	City, State	Zip Code	Area Code & Phone Number (    )
Employment Dates (Month & Year) From:                      To:	Name & Title of Immediate Supervisor		Email Address to HR/Immediate Supervisor
Reason for Leaving			

#### Other Employed Experience

Name of Employer/Organization		Title or Position	
Address	City, State	Zip Code	Area Code & Phone Number (    )
Employment Dates (Month & Year) From:                      To:	Name & Title of Immediate Supervisor		Email Address to HR/Immediate Supervisor
Reason for Leaving			

Name of Employer/Organization		Title or Position	
Address	City, State	Zip Code	Area Code & Phone Number (    )
Employment Dates (Month & Year) From:                      To:	Name & Title of Immediate Supervisor		Email Address to HR/Immediate Supervisor
Reason for Leaving:			

#### Training/Certifications

Health & Safety Certifications		
<input type="checkbox"/> Food Handler's Permit County of Issue: Expiration:	<input type="checkbox"/> Adult/Child CPR (ARC or AHA only) Agency: Expiration: AED Included? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EMT Level: Expiration:
<input type="checkbox"/> ServSafe Expiration:	<input type="checkbox"/> Wilderness First Aid (WFA) Agency: Expiration:	<input type="checkbox"/> LPN Expiration: Licensed to Practice in Utah? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> ARC Standard or Sports First Aid Expiration:	<input type="checkbox"/> Wilderness First Responder (WFR) Agency: Expiration:	<input type="checkbox"/> Registered Nurse or Nurse Practitioner Expiration: Licensed to Practice in Utah? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Training/Certifications Continued

Water Certifications		Ropes/Archery/Horse Certifications	
<input type="checkbox"/> American Red Cross (ARC) Lifeguard Expiration:	<input type="checkbox"/> ACCT Challenge Course Facilitator Level I Expiration:		
<input type="checkbox"/> American Red Cross Waterfront Lifeguard Expiration:	<input type="checkbox"/> ACCT Challenge Course Facilitator Level II Expiration:		
<input type="checkbox"/> CPR for Professional Rescuer Expiration:	<input type="checkbox"/> Archery Instructor Expiration:		
<input type="checkbox"/> Water Safety Instructor Expiration:	<input type="checkbox"/> CHA Certified Riding Instructor Expiration:		
<input type="checkbox"/> Small Craft Safety (Canoeing, Kayaking, Sailing, etc) Expiration:	<input type="checkbox"/> CHA Certified Riding Instructor Expiration:		
<input type="checkbox"/> Licensed River Guide Agency: Expiration:	<input type="checkbox"/> Rock Climbing Guide/Instructor Agency: Expiration:		
Other Certifications/Trainings			
Certification	Agency/Sponsor	Date Received & Expiration	
1.			
2.			

### Skills and Interest Areas

Please rate your proficiency in the activities listed below.

**1 – No Experience**

**2 – Participated in Activity**

**3 – Qualified to Assist**

**4 – Qualified to Teach**

Camping	Environmental Education	Equestrian Skill	Performing Arts
___ Outdoor Cooking ___ Fire Building ___ Primitive Camping ___ Map & Compass ___ Geocaching ___ Hiking ___ Knot Tying/Lashing ___ Game Leadership	___ Stargazing/Astronomy ___ Wildlife/Bird I.D. ___ Plant/Flower/Tree I.D. ___ Native American Lore ___ Project WILD ___ Project WET ___ Project Learning Tree ___ Leave No Trace Principles	___ Western Riding ___ Horse Care ___ Care of Tack ___ Ground School ___ Arena Lessons ___ Trail Leading ___ Pack Trips ___ Horse Training	___ Theatre/Drama ___ Guitar ___ Storytelling ___ Song Leading ___ Sign Language ___ Juggling ___ Magic ___ Instrument: _____
Fine Arts	Camp Crafts	Adventure/Challenge	Sports/Fitness
___ Pottery/Ceramics ___ Kiln Operation ___ Glass Fusion ___ Photography/Dark Room ___ Drawing/Sketching ___ Painting ___ Recycled Arts ___ Sculpture ___ Graphic Arts ___ Mosaic	___ Jewelry Making ___ Sewing ___ Leatherwork ___ Candle Making ___ Scrapbooking ___ Tie Dye ___ Batik ___ Screen Printing ___ Beading ___ Friendship Bracelets	___ Belaying ___ Low Ropes ___ High Ropes ___ Rock Climbing ___ Backpacking ___ Rafting ___ Canoeing ___ Kayaking ___ Sailing ___ Windsurfing	___ Healthy Eating/Nutrition ___ Yoga/Pilates ___ Running (5K+) ___ Bicycling (Road) ___ Swimming ___ Archery ___ Volleyball ___ Soccer ___ Field Hockey ___ Hula Hooping
Leadership		Miscellaneous	
___ Supervision of Children Ages 6-17 ___ Supervision of Adults ___ Girl Scout Program ___ Leadership Development ___ Program Planning ___ Teambuilding/Initiative Games		___ Baking ___ Quantity Cooking (100+ people) ___ Menu Planning ___ Campfire Program ___ Radio/TV/Video Production ___ Foreign Language (specify: _____) ___ Carpentry ___ Electrical ___ Plumbing ___ Gardening/Landscaping	

### References

List three people, not related to you, having knowledge of your character, experience, work habits, and ability.

**Reference #1 - Professional Reference (Former Employer, Supervisor, or Teacher/Professor)**

Name	Address	Email
Title	Phone Number (day)	Phone Number (evening)
How long have they known you?		Relationship

**Reference #2 - Professional Reference (Former Employer, Supervisor, or Teacher/Professor)**

Name	Address	Email
Title	Phone Number (day)	Phone Number (evening)
How long have they known you?		Relationship

**Reference #3 - Character Reference (Friend, Neighbor, Church Leader, Co-Worker, or another Professional Reference)**

Name	Address	Email
Title	Phone Number (day)	Phone Number (evening)
How long have they known you?		Relationship

**Initial: \_\_\_\_\_ I hereby authorize Girl Scouts of Utah to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment. Please indicate whether schooling or employment was under a different name: \_\_\_\_\_**

<p><b>Americans with Disabilities Act</b></p> <p>Do you know of any reason why you would not be able to perform the essential functions of the job position with or without reasonable accommodation?    <input type="checkbox"/> Yes            <input type="checkbox"/> No</p> <p>If yes, what accommodations might be necessary?</p>	<p style="text-align: center;"><b>Criminal Background Check</b></p> <p>Have you ever been arrested and convicted of a criminal offense? *    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, please state the following:</p> <p>Offense: _____</p> <p>Date of Conviction: _____</p> <p>Location of Disposition: _____</p> <p>*A conviction record will not necessarily be cause for disqualification; it will be considered as it relates to specifics of the position for which you have applied.</p> <p><b>A criminal background check with passing results is required for employment.</b></p>
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### Statement of Truth and Requirements of Employment

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I understand that if I am extended an offer of employment, it may be conditional upon successfully passing a complete physical examination and current health history required by the State of Utah. I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without cause and with or without notice. I am aware that I must become a member of the Girl Scouts of the USA. I have read, understand, and by my signature consent to these statements.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_