



Camp Chippewa *est.1958*

2577 Idaho Road

Ottawa, KS 66067

Camping & Retreat Center of the United Methodist Church

Voice 785-242-6797

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campchippewa@greatplainsumc.org

www.campchippewa.org

Employment Application Form

(return your completed application to the address above)

Please complete the application in full, using ink.

DATE: _____

Cell phone: _____

General Information:

E-mail Address: _____

Name _____ Social Security Number _____

Permanent Address _____ Phone _____
Street & Number City State Zip Area/Number

School or Business Address _____ Phone _____
Street & Number City State Zip Area/Number

Are you at least 18 years of age? _____ Are you at least 21 years of age? _____

If under 18 years of age, please fill out the following information:

Parent/Guardian's name _____

Parent/Guardian's address _____

Parent/Guardian's telephone (Home) _____ (Work) _____

Employment Questions:

Position you are applying for: _____

Type of employment desired (check all that apply)

Full Time _____ Part Time _____ Seasonal _____ Other _____ (explain) _____

Are you a former employee? Yes _____ No _____ Dates previously employed _____

Dates you would be available to work: From _____ to _____

When would you be available for an interview? _____ Where? _____

Some of the positions here require you to drive camp vehicles

Do you have a valid driver's license? _____ YES or _____ NO. The state you acquired your license _____

Do you have a commercial driver's license? _____ YES or _____ NO.

Have you had any traffic violations in the last 2 years _____, if yes what type of violations: _____

Are you legally eligible for employment in this country? Yes _____ No _____

Proof of U.S. citizenship, immigration or eligibility for employment will be required upon employment

Educational Background:

High School name, City and State _____ Number of Years _____

College/University/Trade School/ Etc.:

Name & location: _____ Years Completed _____ Degree _____

Other Education & Training:

Name of program _____ Institution _____

Comments: _____

Other Skills, Qualifications & Certifications:

Skill (Lifeguard, WSI, CPR, etc.) _____ Level _____

Certification Date _____ Last Used When? _____

Employment History:

List your last two employers (if applicable) starting with the most recent, including military experience.

Prior Employer _____ Years _____ From _____ to _____

Address _____ Telephone _____

Position _____ Supervisor _____

Nature of Work _____

Reason for leaving _____

May we contact this employer for reference information Yes _____ No _____

Prior Employer _____ Years _____ From _____ to _____

Address _____ Telephone _____

Position _____ Supervisor _____

Nature of Work _____

Reason for leaving _____

May we contact this employer for reference information Yes _____ No _____

Do You have Camp Experience Either as Staff or a Camper?:

Date _____ Camp _____

Director _____ Were you a camper or staff person? _____

Date _____ Camp _____

Director _____ Were you a camper or staff person? _____

References:

Give the name, address and telephone number of three adult business/work references who are not related to you and not shown as your immediate supervisor under the Employment History section on the preceding page. One of these persons should be your Pastor. If not applicable, list three school or personal adult references who are not related to you. **Please give each reference listed below the reference form (page 4 of this document) to complete and return to the Camp Chippewa Office.**

Name

Address

Years Known

It is understood and agreed upon that any misrepresentation by me in this application is sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. Furthermore, I understand that I am an "at-will" employee and that a copy of the Kansas East Conference Personnel Policy is available in the camp office for me to examine, if I so desire.

I give Camp Chippewa the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability Camp Chippewa and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

Camp Chippewa does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal laws.

This application is valid only for the current year. A new application will need to be submitted for each year of seasonal employment.

Signature of Applicant _____ Date _____

(If under the age of 18 Parent /Guardian Signature :)

_____ Date _____

Church Relationship: Membership in The United Methodist Church is not a requirement for employment at Camp Chippewa. However, it is expected that all employees be practicing Christians. Also, since we are an entity of the Great Plains Conference of The United Methodist Church, it is important for all employees to be supportive of the ministry of the GPUMC and in particular Camp Chippewa.

Name of your Church: _____ Telephone: _____

Address: _____ Pastor: _____

Please respond to these questions:

Why do you want to work at Camp Chippewa? _____

Why do you think you can be a positive addition to the Camp Chippewa staff? _____

What do you think is the purpose of Camp Chippewa? _____

Please feel free to attach or use the back side of this sheet to include a brief biographical sketch about yourself or resume, and things you think are important or that would be helpful

Camp Chippewa - Application Reference Form

(Applicant must print three forms and give to each reference person listed on application form. Your application will not be considered for a position without three completed references)



Name of Applicant: _____

Name of Reference: _____

Applicant-the Position you are applying for: _____

1. What is your relationship to the applicant and how long have you known each other?
2. Do you have knowledge of the applicant's abilities of working with children, youth, or possibly adults with developmental disabilities?
3. This position requires interaction with our summer and second season campers of all ages. Would you feel comfortable to leave your own child, children or grandchildren in the applicant's care? Why or Why not?
4. Can you name one strength and one weakness this person may have? (please list, and explain)
5. Have you been in a position to see this person work in any capacity related to the position they are applying for? Please give a brief explanation.
6. If you were in a position to hire this person, would you?
7. In a Summer Camp and Retreat Center setting what areas do you feel this applicant would be **most** comfortable and capable of full filling the responsibilities of or possess a talent for this? Please check all that apply or that you may have knowledge of this applicants abilities:
Activities Areas: Canoeing _____, Archery _____, Low Ropes _____, Horses _____, Arts & Crafts _____, **Food Service Areas:** Cook _____, Kitchen Assistant _____, Housekeeping _____, Maintenance _____, Office Responsibilities: _____, Guest Hospitality _____, Camp Counselor _____, Bible Lessons/Worship _____, Fishing _____, Cooking out _____, Hiking/Nature walks _____, Leading Group Games _____, Creativity _____. Sings _____, Plays an Instrument _____.

Comments on any of the areas you have checked above _____

9. Additional comments you may have which might be helpful in our decision. Please use the back if necessary or feel free to attach your own letter of recommendation.

Please return this form as soon as possible to:

e-mail campchippewa@greatplainsumc.org , or fax:785-242-8525

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Thank you very much for your time!!