

## Shepherd's Spring Summer Camp Volunteer Application

Statement of Practice: In order to safe-guard the well-being of participants served, Shepherd's Spring will investigate the accuracy of the data provided in the application process for all applicants before appointment to the staff can be made. This investigation may include, but is not necessarily limited to, reference checks with past employers, educational institutions, volunteer organizations and agencies, civic groups, and law-enforcement agencies. This information will be used only for purposes of evaluating a person for a position, volunteer or paid staff at Shepherd's Spring.

**\*Three types of volunteer opportunities are available this summer; cabin counselor, activities counselor, and camp support volunteer. All volunteers must be at least 19 years of age, or at least 20 years of age if they wish to volunteer for youth or SAMY camps\***

**Cabin Counselor- Responsible for living with and leading a small group of campers for one week out of the summer, will receive help from a summer staff. A cabin counselor will participate in all activities with the campers and may be expected to lead Bible studies, small group games and other small group activities. A cabin counselor is expected to be a good Christian role model and show an appreciation for God's creation.**

**Activities Counselor- Responsible for leading a small or large group activity, an activities counselor will choose an activity they are knowledgeable in and would like to lead. They will be responsible for making sure the camp has the materials needed for this activity. These activities may include, but are not limited too; basket making, soap making, cooking, fire building, wilderness skills, and recreation games. Activities counselors do not live with campers and may serve on a daily basis or on one or two days of a camp program.**

**Camp Support- Responsible for taking care of miscellaneous tasks that need to be done around camp on a daily basis. These tasks may include; cleaning the lodge rest rooms, sweeping and mopping the dining hall floor, and other similar tasks. A camp support person may arrive each morning and leave in the evenings after all assigned tasks have been completed for that day or they may request lodging at camp if they are serving all week.**

**Position Applying For:** \_\_\_\_\_

**Dates Available to volunteer** \_\_\_\_\_

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**\*Volunteer staff positions will be filled as campers register. Volunteer cabin counselors will need to participate in two day training with the summer staff prior to the start of camp. This year the training will be June 18-19.**

This training is very important and gives volunteers the chance to meet the summer staff, and learn more about their week of camp. You will be able to work on Bible studies, hike around camp, go swimming, and experience other activities the campers are exposed to through out a week of camp.

Will you be able to attend this training \_\_\_\_ Yes \_\_\_\_ No

(This is only required for those persons wishing to be a cabin counselor, It is recommended for activities counselors and staff support volunteers)

\* Depending on the camp you wish to volunteer for, the dates you are available may not be open. If this is the case Shepherd's Spring will notify you as soon as possible. In the case this does occur, would you be willing to volunteer in another capacity? \_\_\_\_ Yes \_\_\_\_ No

If yes, which role? \_\_\_\_\_

\*Part of the application process is a phone interview. This will give you the opportunity to ask questions about camp, as well as to help us use your talents most effectively.

Phone number: \_\_\_\_\_ Best Time to contact you: \_\_\_\_\_

**1. Personal Information**

Full Name \_\_\_\_\_ SS# \_\_\_\_\_ US Citizen \_\_\_ Yes \_\_\_ No

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Email \_\_\_\_\_ Home # \_\_\_\_\_ Cell # \_\_\_\_\_

Home Church \_\_\_\_\_ Pastor \_\_\_\_\_

In Case of Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

**Please Check next to the areas in which you hold a current certification:**  
**(Please include a copy of your certification)**

Red Cross First Aid \_\_\_ CPR \_\_\_ Red Cross Certified Lifeguard \_\_\_ Water Safety Instructor \_\_\_

Canoe Instructor \_\_\_ Other (please specify) \_\_\_\_\_

**2. Legal Background**

Have you ever been convicted of a crime? \_\_\_ Yes \_\_\_ No If yes, describe in full \_\_\_\_\_

Have you ever been convicted of sexual abuse or a crime involving actual or attempted sexual molestation of a minor? \_\_\_ Yes \_\_\_ No If yes, describe in full \_\_\_\_\_

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**3. Work Experience**

**Show present or most recent employer first. If you have more employment experience than there are spaces provided, please list the experiences most relevant to working at a camp or with children/youth.**

1) Company/Organization Name \_\_\_\_\_ Your Position \_\_\_\_\_

Company/ Organization Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_ Reason(s) for Leaving \_\_\_\_\_

Supervisor's Name and Title \_\_\_\_\_

Description of Duties and Responsibilities \_\_\_\_\_

2) Company/Organization Name \_\_\_\_\_ Your Position \_\_\_\_\_  
Company/ Organization Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_ Reason(s) for Leaving \_\_\_\_\_

Supervisor's Name and Title \_\_\_\_\_  
Description of Duties and Responsibilities \_\_\_\_\_

#### **4. Volunteer Experience**

**Please list experiences that are most relevant to working with children/youth or working in a camp setting.**

1) Agency/Organization Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Supervisor's Name and Title \_\_\_\_\_  
Dates you volunteered \_\_\_\_\_  
Description of Duties and Responsibilities \_\_\_\_\_

2) Agency/Organization Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Supervisor's Name and Title \_\_\_\_\_  
Dates you volunteered \_\_\_\_\_  
Description of Duties and Responsibilities \_\_\_\_\_

3) Agency/Organization Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Supervisor's Name and Title \_\_\_\_\_  
Dates you volunteered \_\_\_\_\_  
Description of Duties and Responsibilities \_\_\_\_\_

**\*Please answer the following questions, as thoroughly as possible, if you need more space please attach your answers on a separate sheet of paper.**

**(Only answer the questions for the position for which you are applying)**

**Cabin Counselors:**

**1.** Why do you want to be a volunteer counselor at Shepherd's Spring?

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**2.** Which age group would you be most comfortable working with?

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**3.** Briefly describe your faith journey and how you might share your faith with campers.

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**4.** In your volunteer experiences working with children/youth, please describe exactly what you did in these roles, and how you directly related to the children/youth.

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**5.** Being a counselor requires a person to be physically active by walking a lot and participating in active games with campers. Do you have any physical conditions that may limit your ability to perform these activities? If yes, please explain\_\_\_\_\_

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**Activities Counselor:**

1. What activity would you like to lead, and what materials will you need? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you willing to supply any of these materials \_\_\_\_ Yes \_\_\_\_ No

2. Please list contact information for 3 people whom you have taught this activity.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. To which age group is your activity best suited? \_\_\_\_\_

**Camp Support:**

1. Circle the area(s) you are most comfortable in serving ; kitchen staff, house keeping, office assistant, grounds and maintenance, odd jobs (i.e. delivering water jugs), other \_\_\_\_\_

2. Are you able to lift at least 35 lbs \_\_\_\_ Yes \_\_\_\_ No

3. Are you able to lift at least 50 lbs \_\_\_\_ Yes \_\_\_\_ No

4. Are you physically able to walk around camp \_\_\_\_ Yes \_\_\_\_ No

5. Do you have any physical limitations that would keep you from serving at camp \_\_\_\_ Yes \_\_\_\_ No  
If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

6. Please circle the area(s) where you have experience, briefly describe your skill level on each area circled and where you have gained this experience.

Picture taking \_\_\_\_\_

Fire building \_\_\_\_\_

Song leading \_\_\_\_\_

Driving a golf cart \_\_\_\_\_

Working in a kitchen \_\_\_\_\_

Cleaning \_\_\_\_\_

Office Work \_\_\_\_\_

Other \_\_\_\_\_

7. Are you willing to serve for an entire week \_\_\_\_ Yes \_\_\_\_ No

8. Are you willing to serve several days during the summer \_\_\_\_ Yes \_\_\_\_ No

9. If yes, what days are you available \_\_\_\_\_



**5. References \*Required for all volunteers\***

List three reference other than persons mentioned in the above work and volunteer histories. Please include pastors, mentors, teacher/professors, etc, but do Not list any family members.

(1) Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(2) Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(3) Name \_\_\_\_\_ Relationship to you \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**6. Authorization to Check Criminal Records**

I, \_\_\_\_\_, authorize Shepherd's Spring to receive information from any law-enforcement agency, including police departments and sheriff's departments, of this state or federal government, to the extent permitted by state and federal law, pertaining to any convictions I may have had for violations of state or federal criminal laws, including but not limited to convictions for crimes committed upon children. I understand that such access is for the purpose of considering my application as an employee and that I expressly DO NOT authorize Shepherd's Spring, its directors, officers, employees, or other volunteers or staff to disseminate this information in any way to any other individual, group, agency, organization, or corporation.

Signed \_\_\_\_\_ Date \_\_\_\_\_

(Signature of Applicant)

Signed \_\_\_\_\_ Date \_\_\_\_\_

(Signature of authorized camp representative)

**7. Consent Statement**

The information contained in this form is correct to the best of my knowledge. I authorize any references, companies, organizations, or agencies listed to give you any information they may have regarding my character and fitness to work with children and youth. I release all such references from liability for any damages that may result from furnishing such an evaluation to you.

I agree to be bound by the policies of Shepherd's Spring

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Send Completed Application To:**  
**Shepherd's Spring**  
**PO Box 369**  
**Sharpsburg, MD 21782**

