

MONTLURE SUPPORT STAFF APPLICATION 2008

The Montlure Presbyterian Church Camping Council is committed to providing a safe and secure Christ-centered camp of the highest quality for our campers, and for their parents and their churches. We require all volunteer and paid support staff present on camp to conform to the standards dictated by our status as an American Camp Association Accredited camp by completing this standard support staff application form in full. All application forms will be treated in confidence by the members of the Montlure Camping Council.

Montlure Camp is located in Greer, AZ, and further details of the camp can be found on our web site www.montlure.org.

Please complete this form and email a copy to montlurecamp@gmail.com.

If you are unable to email, you may mail the application to:

Montlure
Attn: Camp Administrator
P.O. Box 122
Greer, AZ 85927-0122

If you have any questions regarding this application, please call 928.735.7534.

Thank you and God Bless. *The Montlure Camping Council*

Personal Information (please type or print)

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Social Security _____ - _____ - _____

Email: _____

Emergency Contact Name, _____ Phone: (____) _____

Relationship to you: _____

Work Experience:

Provide a full record of past employment and explain any gaps of employment. Use a separate sheet, if necessary.

Dates	Employer/Supervisor	Address & Phone	Nature of Work	Reason for Leaving

Indicate any employer you do not wish us to contact and the reason:

Camp Experience:

Provide a full record of all structured camp experiences you have had, including those with Montlure. Use a separate sheet, if necessary.

Dates	Camp / Volunteer Activity	Contact Address & Phone	Nature of Work

Do you hold any special training, certification, or experience in any of the following areas:

Food handling	<input type="checkbox"/> Yes <input type="checkbox"/> No	Arts & Crafts	<input type="checkbox"/> Yes <input type="checkbox"/> No
CPR	<input type="checkbox"/> Yes <input type="checkbox"/> No	Archery	<input type="checkbox"/> Yes <input type="checkbox"/> No
First Aid	<input type="checkbox"/> Yes <input type="checkbox"/> No		

References:

Please provide the names, email address and phone numbers of at least two persons (not relatives) having knowledge of your character, experience, and work habits.

Name	Email	Phone

Self-Certification

We are entrusted by parents, and their churches, with the care and safe keeping of their children during their Montlure camping experience. Therefore, the Council will uphold the highest standards of behavior for volunteer staff. Background checks along with random drug testing may also be conducted. Please answer YES or NO to the following questions.

1. In the last 12 months, have you used any illegal drug, or a prescription drug that you did not receive from a health care provider? Yes No
2. Have you ever committed a criminal offense involving children? Yes No
3. Other than the above, have you been involved in any activity that would call into question your being present on a camp with children and young people? Yes No

If you answer "Yes" to any question, you must explain on a separate, attached sheet.

Electronic Signature and Date *(formal release signatures will be taken at camp)*

Name

Date