



Camp Fire USA™
CENTRAL PUGET SOUND COUNCIL

Camp Sealth

Staff Application

To Apply:
 Complete all forms and submit via snail mail or e-mail (please do not fax)

- 6-page application
- Five reference forms

Send To:
 Camp Sealth
 14500 SW Camp Sealth Rd
 Vashon, WA 98070-8222
 OR
 campstaff@campfire-usa.org

Contact Us:
 Phone: (206) 463 3174
 campstaff@campfire-usa.org
 www.campfire-usa.org

Name:		As of June 18 this coming summer, your age will be:		
"Camp Name" (if previously employed at Sealth):		<input type="checkbox"/> Under 18	<input type="checkbox"/> Over 18	<input type="checkbox"/> Over 21
Present Address: <i>Street</i>		<i>City</i>	<i>State</i>	<i>Zip</i>
Permanent Address: <i>Street</i>		<i>City</i>	<i>State</i>	<i>Zip</i>
Present home phone	Permanent home phone	Cell phone		Until what date may we mail to your present address? Are you a U.S. citizen or eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
E-mail address:		If applying to work directly with children, please rank in order of choice the age levels you prefer to work with. (Please note that staff often work with more than one age level.)		
For which positions are you applying? (Please rank in order of choice)		Grades K – 4 _____ Grades 7 – 8 _____		
1. _____		Grades 5 – 6 _____ Grades 9 – 12 _____		
2. _____		Would you prefer Resident or Day Camp? <input type="checkbox"/> Day <input type="checkbox"/> Resident <input type="checkbox"/> Either		
3. _____		Do you prefer to work with boys or girls? <input type="checkbox"/> Boys <input type="checkbox"/> Girls <input type="checkbox"/> Either		

<p>Employment Availability Dates</p> <p>Eligibility for employment may be based on your availability dates. Check with your school and current employer so you can give us accurate dates.</p> <p>Please check all that apply for the position for which you're applying. Start and end dates vary by position – refer to the Employment Guide for exact dates.</p> <p><input type="checkbox"/> Mid-April to June 10 (Spring EE season)</p> <p><input type="checkbox"/> June 10 – 14 (Leadership Staff Training)</p> <p><input type="checkbox"/> June 15 – 25 (Summer Staff Training)</p> <p><input type="checkbox"/> June 26 – August 24 (Camper Sessions)</p> <p><input type="checkbox"/> August 25 – Sept. 5 (Work Crew)</p> <p><input type="checkbox"/> Sept. 6 – Oct. 15 (Fall EE & Work Crew)</p> <p><input type="checkbox"/> Later than October 15</p> <p>Are there any days during the employment period for which you are applying that you are NOT available? Why?</p>	<p>EDUCATION (College and High School)</p> <table border="1"> <thead> <tr> <th>Name of School</th> <th>Location</th> <th>Last Level Completed</th> <th>Area(s) of Study</th> <th>Dates</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Name of School	Location	Last Level Completed	Area(s) of Study	Dates																									
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<p>EMPLOYMENT & VOLUNTEER EXPERIENCE (Use a separate sheet of paper if necessary)</p> <table border="1"> <thead> <tr> <th>Employer</th> <th>Position</th> <th>Supervisor</th> <th>Phone/E-Mail</th> <th>Dates</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Employer	Position	Supervisor	Phone/E-Mail	Dates																										
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Program Skills

Please rate any of the following activities which you:

“Teach” can **competently, expertly, and independently teach** to youth.

“Assist” can **assist in teaching** to youth.

“Experience” have had experience with.

Please indicate certifications or training in any of these areas; feel free to make any extra notes about your special skills, expertise, etc. Attach a separate sheet if necessary. Please be honest with these ratings; we do not expect anyone to know how to teach all of these activities.

<p>THE ARTS</p> <p>_____ Batik/Tie-Dyeing</p> <p>_____ Beading</p> <p>_____ Candle-making</p> <p>_____ Ceramics/Pottery</p> <p>_____ Cooking</p> <p>_____ Dance – specify kind(s): _____</p> <p>_____ Drama</p> <p>_____ Drawing</p> <p>_____ Leathercraft</p> <p>_____ Musical Instrument(s): _____</p> <p>_____ Nature Crafts</p> <p>_____ Painting</p> <p>_____ Photography: Darkroom work</p> <p>_____ Photography: Digital Editing</p> <p>_____ Photography: Shooting/Composition</p> <p>_____ Sewing</p> <p>_____ Singing</p> <p>_____ Skits</p> <p>_____ Woodworking/Carving</p> <p>_____ Other – describe: _____</p> <p>HORSEBACK RIDING</p> <p>_____ Western Riding</p> <p>_____ English Riding</p> <p>_____ Horse Care</p> <p>Describe your horse experience: _____</p>	<p>OUTDOOR LIVING</p> <p>_____ Backpacking</p> <p>_____ Caving</p> <p>_____ Firebuilding</p> <p>_____ Geocaching</p> <p>_____ Hiking</p> <p>_____ Knots/Lashing</p> <p>_____ Map/Compass</p> <p>_____ Outdoor Cooking</p> <p>_____ Shelters</p> <p>_____ Survival</p> <p>_____ Tools (axe, hatchet, etc.)</p> <p>WATER ACTIVITIES</p> <p>_____ Canoeing</p> <p>_____ Fishing</p> <p>_____ Kayaking</p> <p>_____ Motor Boats</p> <p>_____ River Rafting</p> <p>_____ Rowing</p> <p>_____ Sailing</p> <p>_____ Swimming</p> <p>_____ Windsurfing</p> <p>_____ Other – describe: _____</p> <p>CHALLENGE ACTIVITIES</p> <p>_____ Initiatives</p> <p>_____ Low Ropes</p> <p>_____ High Ropes</p> <p>_____ Climbing Wall</p> <p>Have you received training as a ropes course facilitator? If yes, describe where/when you were trained: _____</p>	<p>NATURE & ENVIRONMENT</p> <p>_____ Astronomy</p> <p>_____ Birds</p> <p>_____ Conservation</p> <p>_____ Forest Ecology & Plants</p> <p>_____ Kids’ Science</p> <p>_____ Insects</p> <p>_____ Marine Biology/Ecology</p> <p>_____ Geology</p> <p>_____ Sustainability</p> <p>_____ Weather</p> <p>_____ Wildlife</p> <p>_____ Other – describe: _____</p> <p>SPORTS & GAMES</p> <p>_____ Archery</p> <p>_____ Baseball</p> <p>_____ Basketball</p> <p>_____ Field Games/Icebreakers</p> <p>_____ Softball</p> <p>_____ Soccer</p> <p>_____ Volleyball</p> <p>_____ Other – describe: _____</p> <p>OTHER</p> <p>_____ Experience with special needs</p> <p>_____ Leadership</p> <p>ANYTHING ELSE???</p>
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<p>Certifications</p> <p>Please check any current certifications, trainings & workshops that you have that might be helpful in working in camp. If you plan to complete a training before beginning work, please indicate the completion date below. You may submit your application even if you have not yet completed any mandatory trainings, as long as they are completed before beginning work.</p> <p>MANDATORY FOR ALL STAFF (Optional for High School Interns) <i>All certifications must be valid through August 24, 2011. Check <u>only</u> if your certification is valid through this date.</i></p> <p><input type="checkbox"/> First Aid Training <input type="checkbox"/> Adult & Child CPR Training <i>Lifeguards must have current CPRPR</i></p> <p>OTHER CERTIFICATIONS <i>Check <u>only</u> if your certification is valid through August 24, 2011.</i></p> <p><input type="checkbox"/> ARC Lifeguard Training <input type="checkbox"/> Water Safety Instructor (WSI)</p> <p><input type="checkbox"/> ARC Waterfront Module <input type="checkbox"/> ARC Small Craft Safety</p> <p><input type="checkbox"/> NAA Archery Instructor Level 1 <input type="checkbox"/> Wilderness First Aid (WFA)</p> <p><input type="checkbox"/> Wilderness First Responder (WFR) <input type="checkbox"/> EMT or Paramedic</p> <p><input type="checkbox"/> Other (specify): _____</p> <p><input type="checkbox"/> Other (specify): _____</p> <p>Do you have plans to complete any of these trainings?</p>	<p>How Did You Hear About Us?</p> <p>How/where did you find out about employment at Camp Sealth? Check all that apply:</p> <p><input type="checkbox"/> Website (specify): _____</p> <p><input type="checkbox"/> Friends/family recommendation Name(s): _____</p> <p><input type="checkbox"/> Attended as a camper</p> <p><input type="checkbox"/> Other Camp Fire USA programs</p> <p><input type="checkbox"/> Saw flyer</p> <p><input type="checkbox"/> School career fair</p> <p><input type="checkbox"/> Was a CIT, RSIT or Intern at Sealth</p> <p><input type="checkbox"/> Other (specify): _____</p> <p>Your feedback helps us recruit quality camp staff in future years. Thank you!</p>
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References

NEW APPLICANTS

All new applicants must submit a minimum of 5 reference forms from former supervisors, employers, coaches, teachers, clergy, mentors, etc. List the names of those 5 people below, plus any others we can contact. **References may not include relatives or peer friends.**

RETURNING STAFF APPLICANTS

Only one reference form is required; use a new reference. List that person below and any others you wish.

References will be verified for all new and returning applicants.

Name	Phone	E-Mail Address	How do you know this person?
1.			
2.			
3.			
4.			
5.			
6.			
7.			

Supplemental Questions

Please answer the following questions in a separate document, and include with your application.

ALL NEW SUMMER STAFF APPLICANTS

1. Describe your leadership experience with children and peers, and your camping/outdoor knowledge.
2. Why are you qualified for the position(s) for which you are applying?
3. How do you think children benefit from a summer camp experience like Sealth?
4. What are your long-term goals, and how does camp fit in with those goals?
5. Working at a summer camp involves long hours, continuous supervision of campers and a close living and working environment with your peers. Describe your ability to adapt to this kind of working environment, and tell us about any hesitations or reservations you may have about working at camp this summer.

ALL RETURNING STAFF APPLICANTS

1. How have you changed or grown since you were last at Sealth?
2. Describe your greatest strengths as a camp staff member, and describe at least two areas you would like to improve on.
3. If you were to repeat any previous summers, what would you have done differently, and why?
4. In your opinion, what is the role of returning staff at camp?
5. What are your long-term goals, and how does camp fit in with those goals?

SUPERVISORY APPLICANTS

(Assistant Camp Director, Unit Leaders, Waterfront & Riding Coordinators, Teen Leadership Coordinator, Tripping Coordinator, Inclusion Coordinator, Specialist Unit Leader, Dining Hall/Grubstake Coordinator)

1. Describe any experience or training you have had in leading/supervising peers.
2. In your opinion, what qualities define a good leader? What qualities do you have that will help you be a good leader?

APPLICANTS FOR ANY SPECIALIZED POSITION

(Wrangler, Kiwanis, Outback/Tripping, Teen Leadership, Archery, Inclusion, Crafts, Nature/Outdoor Living, Photo, Challenge, Horseback Riding, Waterfront, Specialist UL/Meal Host, Health Care Staff)

Describe your experience and training in this specialized area, including any experience teaching others. If you have a relevant certification (such as a WFA, WFR, LT, WSI, etc.) please include documentation with your application.

FOOD SERVICE APPLICANTS

Please list and describe all food service experience and qualifications.

ALL ENVIRONMENTAL EDUCATION SPECIALIST APPLICANTS (Spring Seasonal positions)

1. Give a brief description of any classes or trainings you've attended related to this position.
2. What are your career goals? How will this position help you reach your goals?
3. If you have taught EE in the past: a) describe a lesson you might teach a class of 15 fifth graders for an hour and a half; b) describe your most rewarding experience as a teacher; c) describe your most frustrating experience as a teacher.
4. If you have not taught EE: a) describe some general activities you might lead for 15 youth (any age) for an hour and a half; b) describe what appeals to you most about working with children.
5. Describe the training that you would like during your first two weeks to prepare you for this position.

Criminal Records Check Consent

List all other names used – aliases, maiden name, and any other previous names.

Name _____ Date of Birth _____
Last First Middle

Other names you are known by _____ Social Security Number _____

Address _____ Phone _____
Street City State Zip

Please list all other states you have lived in the past three years: _____

Pursuant to the requirements of RCW 43.43.830-840, Camp Fire must ask you if you have ever been convicted (including a plea of guilty or nolo contendere) of any of the following crimes against children or other persons at any time in the past. This information will be kept confidential.

- | Yes | No | | Yes | No | |
|--------------------------|--------------------------|--|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Aggravated Murder | <input type="checkbox"/> | <input type="checkbox"/> | Sexual Exploitation of Minors |
| <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Murder | <input type="checkbox"/> | <input type="checkbox"/> | Child Abuse or Neglect as Defined in RCW 26.44.020 |
| <input type="checkbox"/> | <input type="checkbox"/> | Communication with a Minor | <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Custodial Interference |
| <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Kidnapping | <input type="checkbox"/> | <input type="checkbox"/> | Selling or Distributing Erotic Material to a Minor |
| <input type="checkbox"/> | <input type="checkbox"/> | First Degree Arson | <input type="checkbox"/> | <input type="checkbox"/> | Malicious Harassment |
| <input type="checkbox"/> | <input type="checkbox"/> | First, Second, or Third Degree Assault | <input type="checkbox"/> | <input type="checkbox"/> | Custodial Assault |
| <input type="checkbox"/> | <input type="checkbox"/> | First Degree Burglary | <input type="checkbox"/> | <input type="checkbox"/> | First, Second, or Third Degree Child Molestation |
| <input type="checkbox"/> | <input type="checkbox"/> | First, Second, or Third Degree Rape | <input type="checkbox"/> | <input type="checkbox"/> | Child Buying or Selling |
| <input type="checkbox"/> | <input type="checkbox"/> | Indecent Liberties | <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Sexual Misconduct with a Minor |
| <input type="checkbox"/> | <input type="checkbox"/> | First, Second, or Third Degree Rape of a Child | <input type="checkbox"/> | <input type="checkbox"/> | First Degree Promoting Prostitution |
| <input type="checkbox"/> | <input type="checkbox"/> | Incest | <input type="checkbox"/> | <input type="checkbox"/> | Patronizing a Juvenile Prostitute |
| <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Robbery | <input type="checkbox"/> | <input type="checkbox"/> | Child Abandonment |
| <input type="checkbox"/> | <input type="checkbox"/> | Vehicular Homicide | <input type="checkbox"/> | <input type="checkbox"/> | First, Second, or Third Degree Assault of a Child |
| <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Manslaughter | <input type="checkbox"/> | <input type="checkbox"/> | Felony Indecent Exposure |
| <input type="checkbox"/> | <input type="checkbox"/> | Unlawful Imprisonment | <input type="checkbox"/> | <input type="checkbox"/> | Promoting Pornography |
| <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Extortion | <input type="checkbox"/> | <input type="checkbox"/> | Violating of Child Abuse Restraining Order |
| <input type="checkbox"/> | <input type="checkbox"/> | Simple Assault | <input type="checkbox"/> | <input type="checkbox"/> | Prostitution |
| <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Criminal Mistreatment | <input type="checkbox"/> | <input type="checkbox"/> | Or Any of These Crimes as They May Have Been Renamed |

If your answer is YES to any of the above, please describe and provide the date(s) of the conviction(s) and the sentence(s) imposed.

Have you ever been convicted of any of the following crimes related to the financial exploitation of a person 60 years of age or older, who has a functional, mental, or physical inability to care for himself or herself, or who is a patient in a state hospital:

- | Yes | No | | Yes | No | |
|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | First, Second, or Third Degree Extortion | <input type="checkbox"/> | <input type="checkbox"/> | First, Second, or Third Degree Theft |
| <input type="checkbox"/> | <input type="checkbox"/> | First or Second Degree Robbery | <input type="checkbox"/> | <input type="checkbox"/> | Forgery |
| <input type="checkbox"/> | <input type="checkbox"/> | Or Any of These Crimes as They May Have Been Renamed | | | |

If your answer is YES to any of the above, please describe and provide the date(s) of the conviction(s) and the sentence(s) imposed.

Have you ever been found in any dependency action to have sexually assaulted or exploited any minor or to have physically abused any minor?

Yes No

Have you ever been found by a court in a domestic relations proceeding to have sexually abused or exploited any minor or to have physically abused any minor?

Yes No

Have you ever been found in any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person?

Yes No

Have you ever been found in any disciplinary board final decision to have abused or financially exploited any person 60 years of age or older or who has a functional, mental, or physical inability to care for himself or herself, or who is a patient in a state hospital?

Yes No

Have you ever been found by a court in a protection proceeding under Chapter 74.34 RCW to have abused or financially exploited a person 60 years of age or older or who has a functional, mental or physical inability to care for himself or herself or who is a patient in a state hospital?

Yes No

If your answer is YES to any of the five questions above, please describe and provide the date(s) of the finding(s) and the penalty(ies) imposed.

Has your name been placed on a registry of child or adult abuse in this or any state? Yes No

Have you been found to have sexually abused or exploited or physically abused any child or adult:

In any court action or proceedings? Yes No

By a professional disciplinary board or the Department of Licensing? Yes No

Have you been denied a license to care for children or adults? Yes No

Have you had a license to care for children or adults suspended or revoked? Yes No

Have you had a DSHS contract terminated? Yes No

Camp Fire will process background checks based on information you filled out here and on the employment application. If you are hired before these reports are available, **your employment will be conditioned upon the receipt of a satisfactory report.**

You will be notified of the results of the background checks within fifteen days after we have received the reports. We will make a copy of the reports available to you upon request.

I have made no willful misrepresentations, omissions, or falsifications of any of the preceding answers. I am aware that should investigation disclose such misrepresentations, falsifications, or omissions in the information I have submitted, my potential employment opportunities with Central Puget Sound Council of Camp Fire can be immediately rejected.

Signature

Date

FOR OFFICE USE:

WA State Check Date: _____ By: _____ File Opened: Yes No Arrest Record Found: Yes No

Openline Online Check Date: _____ By: _____ File Opened: Yes No Arrest Record Found: Yes No

ER Investigative Services Check Date: _____ By: _____ File Opened: Yes No Arrest Record Found: Yes No

Sex Offender Check Date: _____ By: _____ Yes, a Sex Offender or No, not a Sex Offender

Department or Supervisor: Camp Sealth Seasonal Staff

Background Information

Have you ever worked for Camp Sealth or Camp Fire USA in the past? Yes No
If so, what year(s) were you employed, and in what position(s)?

Have you been released from prison or convicted of any crime (including plea of guilty or nolo contendere)? Yes No

If your answer is YES, please provide the details concerning the nature of the offense, the date of conviction and sentence, the jurisdiction in which the conviction took place, etc. A positive response will not automatically bar you from employment.

I understand that there are six (6) pages to this application. I have read and completed this application in its entirety.

Under penalty of perjury, I certify that the above information is true, correct and complete. I understand that if I am hired, I can be discharged for any misrepresentation or omission in the above statements. I also understand that if I am hired, my continued employment may be conditioned upon Camp Fire USA's receipt of satisfactory reports from the Washington State Patrol and other background checks.

Further, I understand and agree that my employment is not for any specific period of time but is at will. "At-will employment" means that either an employee or Camp Fire USA may terminate the relationship at any time. Neither the employee nor Camp Fire USA need demonstrate cause for termination of the relationship.

I authorize Camp Fire USA to solicit information regarding my education, previous employment, and similar background information and to contact schools, employers, and other references I have given on my application. I hereby release all parties and persons connected with any such request for information from all claims, liabilities, and damages for any reason arising out of the furnishing of such information.

In the event I am photographed, filmed or recorded while participating in Camp Fire activities, Camp Fire USA or other partnering organizations approved by Camp Fire may use the photo, film, or recording for publicity, promotional, or instructional purposes.

If employed, I release Camp Fire USA from any liability for future references it may provide regarding my employment with Camp Fire USA.

Signature _____ Date _____

TO COMPLETE THIS APPLICATION:

- Five reference forms (one for returning staff) must be completed and sent with this application or submitted separately. References can be downloaded/printed from the website, or submitted electronically online (http://www.campfire-usa.org/camp/employment_seasonal.htm).
- Be sure to include the answers to the Supplemental Questions with your application.
- This application may be submitted by mail or e-mail. To submit by mail, complete and mail to the address below. To e-mail, scan and save all pages of the application, then send as an attachment to: campstaff@campfire-usa.org. Staff will contact you by e-mail within three days to confirm receipt of your application.

Mailing Address:

Camp Sealth
14500 SW Camp Sealth Road
Vashon, WA 98070

E-Mail Address:

campstaff@campfire-usa.org

