ALTA MONS STAFF APPLICATION

Mail to: Alta Mons 2842 Crockett Springs Road Shawsville, VA 24162

| FOR OFFICE USE ONLY: Date Received | :// Position Applying for: _ | | _ (2 nd : |) |
|---------------------------------------|----------------------------------|-----------------------|-------------------------|---|
| Interview Date:// Interviewed By | : | Offered// | <u>Accepted</u> // Int. | |
| 1. General Information | n: | | | |
| Name: | f | Social Security # : _ | | |
| Date of Birth:// Age | e: Phone (home) : | Cell: | | |
| (May we text your cell number? \Box | Yes 🗆 No) | | | |
| Email Address: | | | | |
| | | | State: Zip: | |
| School I attend: | Major: | Year in | School: | _ |
| School or Other Address: | City: _ | S | tate: Zip: | |
| Which Address should we use to co | ommunicate with you? \Box Scho | ool 🗆 Home 🗆 Ema | ul | |
| Use School Address until (date): _ | _// | | | |
| *Position Applying for : | | Second Choice: | | |
| Will you bring a car to camp? 🗆 Yo | es 🗆 No 🛛 Drivers License Nun | nber: | State: | |
| Can you operate a manual transmi | ssion? \Box Yes \Box No | | | |
| 2. Camp Interests and A | Activities : | | | |
| Do you play a musical instrument? | P□ Yes □ No If yes, which o | ne? | | |
| Are you comfortable singing, speal | | | | |
| Do you have any experiences with | Challenge Courses? 🗆 Yes 🗆 N | No | | |
| If Yes, please explain: | | | | _ |
| Please Rank yourself on a scale of | 1-10(10 being the highest) i | n your competency i | n the following areas: | |
| Worship Ecology | Sports | Storvtelling | | |

Ecology Crafts _ Fire Building Bible Study Games _ Trail Cookery ___ Campsite Setup ___ Archery _____ Drama ___ Canoeing ___ Wilderness Skills Devotions Trail Biking ___ __ Conflict Resolution __ Swimming __ Fishing Song Leader

3. Expectations and Other :

Camp life can be very demanding. Are you prepared to be on call or with campers 24 hours a day, sometimes without breaks, to help out where ever needed? \Box Yes \Box No

If NO, please explain:

As a leader at Alta Mons, you will be a role model for children and youth and a member of a diverse Christian community. Are you willing and able to refrain from the use of tobacco products, alcoholic beverages, illegal drugs, sexual misconduct, abuse of any kind, and offensive and non-inclusive language during the on-duty hours? \Box Yes \Box No

If NO, please explain: ______ Do you understand that if you do participate in these activities during your off-duty hours, you are liable for your own actions knowing the above actions will reflect badly upon Alta Mons? \Box Yes

Please check any current certifications you hold:

| □ Community First Aid - Date Valid:// | CPR – Date Valid:// |
|---------------------------------------|-----------------------|
| □ Lifeguard – Date Valid:// | □ CPO – Date Valid:// |
| Other Certifications: | |

4. References:

| Minister/Teacher: | Phone: | | |
|-------------------|--------|------|--|
| Employer: | Phone: | | |
| Character: | Phone: | | |

Please answer the following on a separate sheet of paper: (There are no wrong answers.)

Why do you want to work at Alta Mons?

What is Alta Mons from your perspective?

What do you hope to give and receive from an Alta Mons Staff experience?

How would you describe your personal work ethic? What drives you to work harder when you have given everything you've got?

How do you handle authority figures in your life?

Training:

Internship Training is June 10 – June 14, 2013. Will you be able to attend this training? \Box Yes \Box No Staff Training is June 19 – June 28, 2013. Will you be able to attend this training? \Box Yes \Box No The Summer Camp Program will last from *June 30 – July 26th* and select interns will be required to stay until August 3, 2013 (Not including weekends) Will you need to miss work during these dates? If so, when?_____

When are you available for an interview? ______

*I agree to work at any job to which I am assigned.

Alta Mons will provide room and board for the duration of my employment, and I agree to upkeep the facilities to which I am assigned.

If accepted, I agree to personally and immediately notify to Program Coordinator if personal circumstances affect my availability.

And by signing this form, I attest that all information I have provided is truthful.

Signature X _____ Date: __/_/___