



Word of Life Youth Camp
SUMMER STAFF APPLICATION

Tel: 519-376-3516 Ext. 201
Camp@wol.ca
www.wolyouthcamp.com

APPLICANT INFORMATION

FIRST NAME _____ LAST NAME _____

GENDER: M F AGE _____ BIRTHDATE _____

CURRENT ADDRESS _____

CITY _____ PROV _____ POSTAL CODE _____ COUNTRY _____

PHONE (____) _____ CELL(____) _____ EMAIL _____

PARENT'S EMAIL (IF APPLICANT IS UNDER 18) _____

HIGHEST LEVEL OF SCHOOL COMPLETED _____

MARITAL STATUS: SINGLE ENGAGED MARRIED

SHIRT SIZE (UNISEX): SMALL MEDIUM LARGE XL XXL

IS YOUR FIRST LANGUAGE ENGLISH: YES NO

ARE YOU FLUENT IN ENGLISH YES NO MODERATE

Are there any reasons why your duties would be limited due to physical limitation or disability? YES NO

If yes, please explain _____

PERSONAL

Why did you apply to be a camp staff member?

What do you hope to accomplish this summer?

Experience working with children/teens; where, age group, name of program, activities:

Have you ever been convicted of a crime or do you currently have charges pending?

If yes, please explain: YES NO

If no, are you willing to undergo a Police Records Check/Vulnerable Sector Check? YES NO

Have you ever led a camper to Christ? YES NO If yes, please include explanation:

What age group are you the most comfortable working with?

ELEMENTARY JR. HIGH SR. HIGH NO PREFERENCE

CURRENT/MOST RECENT EMPLOYER

CONTACT NAME _____ TITLE _____ EMPLOYMENT FROM _____ TO _____

COMPANY _____ ADDRESS _____ CITY _____ PROVINCE _____

POSTAL CODE _____ TELEPHONE NUMBER _____ FAX NUMBER _____

JOB RESPONSIBILITIES:

PREVIOUS EMPLOYMENT

CONTACT NAME _____ TITLE _____ EMPLOYMENT FROM _____ TO _____

COMPANY _____ ADDRESS _____ CITY _____ PROVINCE _____

POSTAL CODE _____ TELEPHONE NUMBER _____ FAX NUMBER _____

JOB RESPONSIBILITIES:

MINISTRY OPPORTUNITIES

What position are you interested in? Indicate in order of your first, second and third choice by marking **1,2, or 3** in the following list. Note that there are minimum age requirements for all positions and **no positions** will be confirmed until training week. * Positions subject to change.

LEADERSHIP STAFF: ___ PROGRAM COORDINATOR ___ PROGRAM ASSISTANT ___ HEAD COUNSELLOR

COUNSELLING STAFF: ___ SR. COUNSELLOR ___ JR. COUNSELLOR

SUPPORT STAFF: ___ FOOD PREP ___ KITCHEN ___ MAINTENANCE ___ HOUSEKEEPING

SPECIALITY STAFF: ___ LIFEGUARD ___ CAMP NURSE/MEDIC ___ TECH

ADDITIONAL OPPORTUNITIES

Check off any camp activities you would be interested in being involved with. Check all that are applicable.

PAINTBALL VIDEO EDITING AUDIO EQUIPMENT PHOTOGRAPHY ARCHERY HIKING

CAMPING CRAFTS PRAISE TEAM DRAMA OTHER: _____

Do you play a musical instrument? YES NO If yes, which? _____

REFERENCES

Please indicate the 3 individuals who will be sending in your reference forms. It is the responsibility of the applicant to follow up on these individuals and ensure that the forms are sent in. All 3 forms must be returned in order for the applicant to be considered for a position. Forms will be attached to the acceptance email if applicant is accepted for WOLYC Staff.

Reference #1 - *Pastor*

Name:	Phone #:
Email:	Church Address:

Reference #2 - *Friend*

Name:	Phone #:
Email:	

Reference #3 - *Employer*

Name:	Phone #:
Email:	

AVAILABILITY

*Student staff must apply for the entire 6 weeks of summer camp. No guarantee of exceptions.

- Week One July 5 - 10
- Week Two July 12 - 17
- Week Three July 19 - 24
- Week Four July 26 - 31
- Week Five August 2 - 7
- Week Six August 9 - 14

ALL STAFF: It is mandatory for every camp staff member to attend the pre-camp training sessions:

Pre-Camp Training:

June 28 – July 3 at 7pm – 28th
at Word of Life Youth Camp

*No extra cost for training.

SUPPORT RAISING INFORMATION:

AMOUNT	DESCRIPTION
\$650 (Minimum)	This will cover the cost of living without allowance .
Goal: \$3,000	This will cover the cost of living with bi-weekly allowance . An 8% administration fee is subtracted from the total support that is raised. <ul style="list-style-type: none"> • ALLOWANCE VARIES DEPENDING ON THE AMOUNT THE INDIVIDUAL RAISES IN FINANCIAL SUPPORT.
<p>NOTE: One free weekend of Recharge and free admission to the summer staff reunion is available <i>only for those who commit to serving the whole summer and were staff in the previous year</i>. (Those on staff two or more years pervious are required to pay admission). All staff members get a free staff shirt.</p>	

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DOCTRINAL QUESTIONNAIRE

INSTRUCTIONS FOR COMPLETING THIS SECTION – READ CAREFULLY

FOR ALL STAFF:

1. This section must be completed entirely before you can be considered to serve this summer.
2. You must answer each question with your own words and with a bible verse that supports your answer. These are short answer questions. 2 – 3 sentence answers or longer are required.

Part One: SALVATION

Explain the Gospel (Provide Scripture) _____

Is everyone born a sinner? (Provide scripture) _____

Did Christ die for everyone's sin? (Provide scripture) _____

Can anyone lose their salvation? Why or why not? (Provide scripture) _____

Is Hell real? (Provide scripture) _____

Is there only one way to Salvation or many ways? (Provide scripture) _____

If a person does not accept the Gospel will they be eternally punished? (Provide scripture) _____

Part Two: THE BIBLE

Is the Bible inspired? What does it mean to be inspired? (Provide scripture) _____

Is the Bible truth? (Provide scripture) _____

Part Three: JESUS CHRIST

Is Jesus God? (Provide scripture) _____

Was Jesus without sin? Why or why not? (Provide scripture) _____

Part Four: MAN

Is man a product of evolution, creation or both? Why or why not? (Provide scripture) _____

Part Five: HOLY LIVING

Would you say that you are growing in your relationship with God? Why or why not? _____

What Christian disciplines do you exercise? _____

Have you ever been disciplined? If so, who disciplined you? _____

Do you have an accountability partner? _____

PERSONAL TESTIMONY

Please share your testimony of how you came to know Christ and your walk with him up until now.
