



# ATTLEBORO YMCA SUMMER CAMPS 2019

## Staff Application

Application Date: \_\_\_\_\_

Position applying for: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Contact Information:

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Town: \_\_\_\_\_

\_\_\_\_ Current Student (Grade: \_\_\_\_\_)      \_\_\_\_ Graduate (Graduation Date: \_\_\_\_\_)

College: \_\_\_\_\_ Major: \_\_\_\_\_

\_\_\_\_ Current Student (Year: \_\_\_\_\_)      \_\_\_\_ Graduate (Graduation Date: \_\_\_\_\_)

### Certifications

Please list any current certifications (with expiration dates) that are applicable to your role as a summer camp staff member.

\_\_\_\_\_

\_\_\_\_\_

### Previous Work or Camp/Recreation Experience

1. Employer / Program Name: \_\_\_\_\_ Location: \_\_\_\_\_

Position: \_\_\_\_\_ Dates Worked: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

2. Employer / Program Name: \_\_\_\_\_ Location: \_\_\_\_\_

Position: \_\_\_\_\_ Dates Worked: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

3. Employer / Program Name: \_\_\_\_\_ Location: \_\_\_\_\_

Position: \_\_\_\_\_ Dates Worked: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

**Camp Program Skills:** In the following list, put a "T" before those activities you can teach as an expert, and an "A" for those activities in which you can assist. Put a "C" after those in which you have current certification and attach a copy of your certification.

<b>Adventure / Challenge</b> <input type="checkbox"/> challenge / ropes course <input type="checkbox"/> climbing / rappelling <input type="checkbox"/> teambuilding activities  <b>Arts / Crafts</b> <input type="checkbox"/> ceramics / pottery <input type="checkbox"/> drawing / painting <input type="checkbox"/> leather craft <input type="checkbox"/> metal work <input type="checkbox"/> photography <input type="checkbox"/> woodworking  <b>Campcraft / Pioneering</b> <input type="checkbox"/> backpacking <input type="checkbox"/> campcraft <input type="checkbox"/> hiking <input type="checkbox"/> orienteering <input type="checkbox"/> outdoor cooking <input type="checkbox"/> outdoor living skills <input type="checkbox"/> overnights <input type="checkbox"/> wilderness trips  <b>Dance (list)</b>  	<b>Drama</b> <input type="checkbox"/> clowning <input type="checkbox"/> theater  <b>Music</b> <input type="checkbox"/> singing <input type="checkbox"/> instrument (list)  <b>Nature</b> <input type="checkbox"/> animals / animal care <input type="checkbox"/> astronomy <input type="checkbox"/> birds <input type="checkbox"/> environmental studies <input type="checkbox"/> flowers <input type="checkbox"/> forestry <input type="checkbox"/> insects <input type="checkbox"/> rocks / minerals <input type="checkbox"/> weather  <b>Sports / Fitness</b> <input type="checkbox"/> aerobics / exercise <input type="checkbox"/> archery <input type="checkbox"/> baseball / softball <input type="checkbox"/> basketball <input type="checkbox"/> biking <input type="checkbox"/> dodgeball <input type="checkbox"/> fishing 	<input type="checkbox"/> football <input type="checkbox"/> golf <input type="checkbox"/> gymnastics <input type="checkbox"/> hockey <input type="checkbox"/> informal games <input type="checkbox"/> martial arts <input type="checkbox"/> skating <input type="checkbox"/> soccer <input type="checkbox"/> tennis <input type="checkbox"/> track / field <input type="checkbox"/> volleyball  <b>Aquatics</b> <input type="checkbox"/> canoeing <input type="checkbox"/> competitive swimming <input type="checkbox"/> life guard skills <input type="checkbox"/> swim lessons <input type="checkbox"/> synchronized swimming <input type="checkbox"/> water polo  <b>Miscellaneous</b> <input type="checkbox"/> academics <input type="checkbox"/> aviation <input type="checkbox"/> community service <input type="checkbox"/> farming / gardening <input type="checkbox"/> foreign language <input type="checkbox"/> leadership development <input type="checkbox"/> radio / tv / video <input type="checkbox"/> storytelling 
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**Personal / Professional References (at least one must be a family member)**

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_

4. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_

I certify that all information I have provided in order to apply for and secure work with the Attleboro YMCA is true, complete, and correct. I understand that any information provided by me that is found to be false, incorrect, or misrepresented in any manner will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the YMCA's service, whenever it is discovered.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date