



CAMP HOMEWARD BOUND
Camp Staff Application

(Please type or print)

Date of Application: _____

Name: _____

Permanent Address: _____
Street & Number City State Zip

Phone: _____ Fax: _____

Current Address: _____

Phone: _____ Cell: _____ Fax: _____

E-mail: _____ At current address until: _____

Camp Placement Information

Dates available: from _____ to _____

Position applying for: _____

Other positions you are qualified for: _____

Age & Eligibility

Are you at least 18 years old by first day of employment: [] YES [] NO

Are you at least 21 years old by first day of employment: [] YES [] NO

Are you eligible for employment in the United States? [] YES [] NO

If no, you will be given information about how to apply as an international applicant.

Do you have any physical limitations that might prevent you from performing the full responsibilities of the position applied for in a safe and efficient manner? [] YES [] NO

If yes, please explain: _____

Where did you hear about Camp Homeward Bound?

[] I met a Camp Homeward Bound or Coalition For The Homeless representative (Name: _____)

[] A present or former Camp Homeward Bound or Coalition For The Homeless staff member (Name: _____)

[] College Career Office [] In The Media

[] American Camp Association [] Internet

[] Summer Employment Directory [] Other: _____

Which college/website/directory/publication? _____

Education

Current College Status:

- [] Freshman [] Junior [] Graduate
[] Sophomore [] Senior [] No College

High School

College

Graduate Work

Name of School & Location

Name of School & Location

Name of School & Location

Diploma/GED

Degree

Degree

Major/Minor

Major/Minor

Major/Minor

Experience

Please list past and current jobs/activities including military service, employment while in school and self employment. Please begin with most recent. *(Please type or print)*

Experience 1

 Dates

 Company/Organization

 Address

 Responsibilities

 Responsibilities contd.
Experience 3

 Dates

 Company/Organization

 Address

 Responsibilities

 Responsibilities contd.
Experience 2

 Dates

 Company/Organization

 Address

 Responsibilities

 Responsibilities contd.
Experience 4

 Dates

 Company/Organization

 Address

 Responsibilities

 Responsibilities contd.
References

Use this section to give us an idea of who you will be using as references. Former and present employers, supervisors and school advisors are preferred. Please remember that relatives should not be listed as references. Most importantly, you should include people who have seen you working with children when possible. Please provide at least three (3) references. *(Please type or print)*

Reference 1

 Name

 Company/Organization/School

 Phone

 E-mail

 Capacity known (e.g. employer, school advisor, etc.)
Reference 3

 Name

 Company/Organization/School

 Phone

 E-mail

 Capacity known (e.g. employer, school advisor, etc.)
Reference 2

 Name

 Company/Organization/School

 Phone

 E-mail

 Capacity known (e.g. employer, school advisor, etc.)
Reference 4

 Name

 Company/Organization/School

 Phone

 E-mail

 Capacity known (e.g. employer, school advisor, etc.)

Certifications

Do you have a current Driver’s License? YES NO If yes, expiration date: _____

Tell us about any certification courses that you have taken—courses such as First Aid, CPR, Responding To Emergencies, Lifeguarding, Water Safety Instruction, etc. are very useful at camp.

Name of Certification		Name of Certification		Name of Certification	
Date of Course	Expiration Date	Date of Course	Expiration Date	Date of Course	Expiration Date
Name of Certification		Name of Certification		Name of Certification	
Date of Course	Expiration Date	Date of Course	Expiration Date	Date of Course	Expiration Date

Essay Questions

Please describe any leadership experiences you have had.

What summer camp experiences, if any, have you had?

Please describe any other experiences you have had working with children.

If applying for Activity Counselor position, please describe in detail your experience in the activity(ies) you feel qualified to teach.

Conviction Information

Criminal convictions are not an absolute bar to employment, but will only be considered in relation to the specific job requirements of the position for which you have applied. An applicant for employment with a sealed record on file with the commissioner of probation may answer 'no' with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer 'no' with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services, which did not result in a criminal conviction.

Have you been convicted of a felony? YES NO If yes, give date(s) and explain: _____

Have you been convicted of a misdemeanor within the past 5 years? (*Do not include a first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray, disturbances of the peace, or actions related to civil disobedience.*)

YES NO If yes, give date(s) and explain: _____

Please read carefully and sign the statement below

I certify that the information given above is true and complete, and I understand that misrepresentation and/or withholding of information will result in the rejection of this application or my discharge if discovered after employment begins. I authorize the Coalition for the Homeless (CFTH) to make inquiries regarding my history and character of prior employers and schools, among others, and hereby release employers, schools or individuals from all liability in responding to inquiries in connection with my application and release CFTH from all liability with respect to such inquiries. I understand that if employed by CFTH that I will be an employee "at will" and that I may terminate my employment at any time, with or without cause or note, and that CFTH also has the right. I also understand that no representative of CFTH, other than the Executive Director, has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and that such agreement must be in writing. If I am employed, I agree to abide by CFTH's policies, rules and procedures and any changes thereto.

Signature _____ Date _____

NOTICE OF SOCIAL SERVICES LAW 424-a PROCEDURES

Please read this carefully. It may impact upon your continued employment with Camp Homeward Bound.

Section 424-a of the New York State Social Services law requires this organization, as a provider of services for children in facilities certified by the Department of Health, to inquire whether anyone actively being considered for employment or consultancy who will have the potential for regular and substantial contact with children being cared for by the organization is the subject of an indicated report of child abuse or maltreatment on file with the State Central Register of Child Abuse and Maltreatment (Department of Social Services). This section of the law also requires us to make such an inquiry regarding an employee of an individual, corporation, partnership, or association which provides us with goods or services and who has or will have the potential for regular and substantial contact with children residing at a facility under the auspices of this organization.

This organization will make the required inquiry to the State Central Register regarding yourself, based on the position for which you have applied, are being considered, or which you currently occupy. If the result of this inquiry shows that you are the subject of an indicated report of child abuse or maltreatment, you will be notified of this by the State Central Register. This organization will also be advised of the findings.

If the State Central Register replies to our inquiry that you are the subject of an indicated report of child abuse or maltreatment, this organization must consider that factor, along with other background information, in determining whether to employ you, retain you as an employee, hire you as a consultant or to allow access to provide goods or services to this organization. You may be asked to provide details of the situation(s) that gave rise to the indicated report. You will also be asked to sign a release allowing this organization to receive a copy of the indicated report on file with the State Central Register. Your refusal to sign this release will be taken to mean that you do not wish us to further consider your application.

If you are denied employment, terminated as an employee, not hired as a consultant, or denied access to any of our facilities for the purpose of providing goods or services -- and such denial is based, in whole or in part on the existence of an indicated report of child abuse or maltreatment, you will be provided a written statement explaining the reason for denial. You will also be informed, at that time, of your right, pursuant to Sections 22 and 424-a of the Social Service Law, to request a hearing before the New York State Department of Social Services on the indicated report on file with the State Central Register.

All information obtained through this process is confidential.

Given To _____ Date _____ By _____
Name of Applicant *Date* *Camp Homeward Bound*
Name of Organization

ACKNOWLEDGEMENT BY APPLICANT OF THE PROCESS WHEREBY THE APPLICANT'S HISTORY IN RELATION TO POSSIBLE CHILD ABUSE OR MALTREATMENT IS CHECKED AT THE STATE CENTRAL REGISTER

I, _____
Name of Applicant—please print

Please check HAVE HAVE NOT

Been a subject of an indicated report of child abuse or maltreatment (an indicated report of child abuse is a report on file with the State Central Register of the New York State Department of Social Services because some credible evidence exists to support that you have been involved in a case of child abuse and/or maltreatment). I have received notice of the requirements of Social Service Law 424-a, and I understand that if information regarding my past history with the State Central Register for Child Abuse and maltreatment is contained in a report from the Register, it will be used to determine my suitability to take a position that involves regular and substantial contact with children under eighteen years of age. I further understand that any misrepresentation of my status or of the information given will result in administrative action, which may include dismissal or discipline.

Applicant's Signature *Date*