

Office fill in only	
Date application received:	
Interview Time & Date:	

# STAFF APPLICATION FORM

Please print this application, fill it out, scan it, and email it to info@riversedgecamp.org.

Personal Inform	·					1 0	
Please print on line at	pove requested information						
				□Paid	□Volunteer	□Raising Support	
Position examples	Position Applying For					<u> </u>	
•Cabin Leader			□Male	□Female			
•Medic	Full Name		Gender			Camp Nickname (eg. Moose)	
-Photographer/							
Videographer	Address						
•Programmer							
•Food Services	City		Province		Postal Code		
<ul><li>Hospitality</li></ul>							
•Maintenance	Social Insurance Number		Citizenship		Driver's Licens	se #	
•Housekeeping							
•Equine	E-mail		Cell Phone #		Alternate Pho	ne #	
	Best way to contact	□E-Mail	□Cell Phone (call)	□Cell Phone (te	ext) □Home P	hone	
	Birth Date (eg. Jan 1, 1990	)		Age		Today's Date	
	Yes □No			□Yes	□No		
	Are you currently in schoo	l? (high schoo	l,			ool in the fall? (high school,	
	college, university, etc.)			college, university, etc.)			
	tact Information						
Please print on line at	pove requested information						
	Parents/Guardians Name		Parents/Guardians E-mail				
	Parents/Guardians Cell Phone #		Parents/Guardians Alternate Phone #				
	Emergency Contacts Name		Emergency Contacts E-mail				
	Emergency Contacts Cell P	hone #		Emergency Contacts Alternate Phone #			

## Experience

Please feel free to use separate sheets for more information

Education Experience
(including name of last school attended, dates, grade/degree completed)
Mark Functions
Work Experience (including positions held, dates, and duration)
Leadership/Teaching Experience (formal leadership training, school, children's club, sports, arts, etc.)
Ministry Experience (short term mission, camps, Sunday school, youth groups, church)

### 1+ Principle

The following information will assist us in knowing your interest level and skill in common Rivers Edge tasks/activities. During your time at Rivers Edge you may be asked to perform tasks outside of those listed as your preferred skills. At Rivers Edge we ask our Staff to be flexible and to work within the 1+ principle.

**The 1+ Principle:** Teamwork is a vital part of any camping program. Although all staff have a primary role at Rivers Edge Camp, when help is needed they will be required to assist in multiple areas of the camp. This means we all agree to remain flexible and provide assistance in more than one area of the camping ministry.

□ I understand the 1+ principle and am excited to work at Rivers Edge wherever I am most needed!

### Confidential Self Evaluation and Personality

#### Please check the box that best applies to you.

	Excellent	Good	Average	Poor
Responsibility				
Work habits				
Respect for authority				
Initiative				
Leadership				
Judgement				
Concern for others				
Personal integrity				
Team spirit				
Social skills				
Spiritual maturity				
Flexibility				
Physical health				

## Spiritual Experience

Briefly explain how and when you became a Christian.
Briefly state what being a Christian means to you.
What steps are you currently taking to grow in your spiritual walk?

	Why are you considering Rivers Edge as a place to serve?				
	Provide the names of three people who v	will be praying for you as you serve:			
	1.	2. 3.			
Church Ba	ckground				
	n line above requested information				
	Name of Church you attend	City			
	How often do you attend (include types of ev	vents you attend)?			
	Pastor/Youth Leader	Pastor's Phone (with area code)			
	Pactor's F-mail	Pastor's Alternate Phone (with area code)			
	Pastor's E-mail	Pastor's Alternate Phone (with area code)			
Reference		Pastor's Alternate Phone (with area code)			
		Pastor's Alternate Phone (with area code)			
	MPLETE ALL 3 REFERENCES	Pastor's Alternate Phone (with area code)			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader				
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to	your spiritual maturity. (Please include name and phone #)			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to Name:	your spiritual maturity. (Please include name and phone #)			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to	your spiritual maturity. (Please include name and phone #)  E-mail:			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to Name: Phone Number:	your spiritual maturity. (Please include name and phone #)  E-mail:			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to Name: Phone Number:	your spiritual maturity. (Please include name and phone #)  E-mail:			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader  This person needs to be able to speak to  Name:  Phone Number:  Relationship:	your spiritual maturity. (Please include name and phone #) E-mail:			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to Name: Phone Number: Relationship:  2. Employer/Teacher/Supervisor	your spiritual maturity. (Please include name and phone #) E-mail:			
	This person needs to be able to speak to Name:  Phone Number: Relationship:  2. Employer/Teacher/Supervisor Name:	your spiritual maturity. (Please include name and phone #) E-mail: E-mail:			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to Name: Phone Number: Relationship:  2. Employer/Teacher/Supervisor Name: Phone Number:	your spiritual maturity. (Please include name and phone #) E-mail: E-mail:			
	MPLETE ALL 3 REFERENCES  1. Pastor/Mentor/Friend/Youth Leader This person needs to be able to speak to Name: Phone Number: Relationship:  2. Employer/Teacher/Supervisor Name: Phone Number:	your spiritual maturity. (Please include name and phone #) E-mail: E-mail:			
	This person needs to be able to speak to Name:  Phone Number: Relationship:  2. Employer/Teacher/Supervisor Name: Phone Number: Relationship:	your spiritual maturity. (Please include name and phone #) E-mail: E-mail:			
	This person needs to be able to speak to Name: Phone Number: Relationship:  2. Employer/Teacher/Supervisor Name: Phone Number: Relationship: 3. Employer/Teacher/Supervisor	your spiritual maturity. (Please include name and phone #) E-mail: E-mail:			

# Availability

AM AVAILABLE: (check all that apply)
□ Full Time Starting:
□ Spring (May-June)
□ Summer (July and August)
Please specify dates you will need off/additional information:

## Skills/Interests

Knowledge of your skills helps us utilize your talents at camp

PROGRAM RELATED POSTIONS ONLY.

Eg. Cabin leader, medic, programmer, equine, etc.

### Please mark the following camp program components as noted:

	Have accreditation in area	Interested and capable of teaching	Interested but need training	Capable but not interested	Please don't put me there!!
Admin					
Archery					
BMX					
Café/Store					
Ceramics					
Drama/Skits					
Food Services/Hospitality					
First Aid/CPR					
High Ropes					
Horses/Equine					
Housekeeping					
Maintenance					
Music (specify below)					
Paracord Bracelets					
Photography/Video					
Riflery					
Sling Shots					
Sports					
Swimming/Lifeguarding					
Survival/Outdoor Living					
Tie Dye T Shirts					
Video Editing					
Wall Climbing					
Wide-Games					

What instruments do you play?	
Other information about your skills:_	

# Declaration □ I hereby allow Rivers Edge Camping Association to keep my information on a mailing list for the sole use of communicating information with myself and other staff members. □ I also allow Rivers Edge Camping Association to use any photos of me taken during my time at camp for advertisement purposes. □ I hereby declare that the information provided in this document is true to the best of my knowledge, and any false statement automatically voids this application and is reason for dismissal as a staff member at Rivers Edge Camp. Date Signature Date Parent/Guardian Signature (if under 18) **Vulnerable Sector Check** A "Vulnerable Sector (VS) Check" is needed for each applicant before finalization of employment. A VS check is designed to protect vulnerable Canadians from dangerous offenders by uncovering the existence of a criminal record and/or a pardoned sexual offence conviction and is needed as part of an overall employment or volunteer screening process. The results of the check can help to determine whether an individual is suitable to work in positions where they will be in close contact with vulnerable people. Before working at Rivers Edge you will need to get a Vulerable Sector Check from your local police station. Depending on which district you reside there may be applicable fees. This form needs to be submitted to the camp before finalization of employment. Thank you for applying at Rivers Edge Camp. Please send completed application to: E-mail: info@riversedgecamp.org Rivers Edge Camp

Box 39

Cremona, AB TOM 0R0 Phone: (403) 637-2766 Fax: (403) 637-2765