



Rockford Christian Camp
Staff Application, Talent and Interest Record



Name: _____ Home Phone: () _____

Work Phone: () _____

Address: _____
Street City St Zip

Present occupation: _____ Age: _____

Hobbies: _____

Experience as a camper (yrs & places) _____

Camp staff experience (yrs & places) _____

Other useful experience _____

Married? Yes ___ No ___ Your children & ages _____

Major church activities _____

Complete **CHURCH REFERENCE FORM**(next page)

Read RCC "SAFE CAMP" policy (next page) and sign following statement:

I have read said policy and I agree to fully abide by it. Signed: _____ Date _____

Please check areas of camp life in which you are willing to work:

- | | | |
|-----------------------|---------------------|---------------------------------------|
| Bible Teacher | Camp Director | Food Service Director (Certified Y N) |
| Counselor | Counseling Director | Cook Cook Assistant |
| Assistant Counselor | Education Director | Kitchen/Dining Room Helper |
| Crafts/Nature Teacher | Programs Director | Nurse: RN EMT LPN First Aid |
| Life Guard | Recreation Director | Utility/Handyman |

Specify the session you desire to work. Indicate an alternate if any.

I want to work at _____ session 20 ____ . Dates: _____ to _____

I want to work at _____ session 20 ____ . Dates: _____ to _____

(Go to http://www.rcchome.com/staff_information.htm to find information about the current dates and directors.)

Talents & Interests: Mark 1 before activities you can lead/teach; 2 can assist with; 3 have interest in.

- | | | | | |
|--|---|---|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Campfire programs | <input type="checkbox"/> Lead devotionals | <input type="checkbox"/> Mixers & games | <input type="checkbox"/> Sports | <input type="checkbox"/> Good Swimmer |
| <input type="checkbox"/> Lead singing | <input type="checkbox"/> Talent night/skits | <input type="checkbox"/> Archery | <input type="checkbox"/> Field day | <input type="checkbox"/> Fair Swimmer |
| <input type="checkbox"/> Nature hikes | <input type="checkbox"/> Treasure hunts | <input type="checkbox"/> Volleyball | <input type="checkbox"/> Canoeing | <input type="checkbox"/> Non Swimmer |
| <input type="checkbox"/> Birds | <input type="checkbox"/> Plants | <input type="checkbox"/> Insects | <input type="checkbox"/> Home crafts | <input type="checkbox"/> Camp crafts |
| | | | <input type="checkbox"/> Lifesaver | |

Mail to camp session director or to: Rockford Christian Camp, P.O. Box 5966, Rockford, IL 61125



Rockford Christian Camp Staff Application
Part II: Safe Camp Policy and Church References



RCC “SAFE CAMP” POLICY:

The intent of this policy is to help the camp provide a safe and secure environment for those children and youth that participate in our programs and activities. A child's freedom from abuse and harassment, whether physical, sexual or emotional, is a major concern to the directors of Rockford Christian Camp. Our first concern is to protect the campers, those souls that God has placed in our hands. However, we are also interested in guarding the name of Christ and protecting the reputation of Rockford Christian Camp, Inc.

As a staff person you will be expected to do your part in protecting children from abuse in any form and reporting to the director any abuse or suspicion of abuse you witness. Be aware that the directors and nurses of the camp are required by state law to report any case of physical or sexual abuse of which they have knowledge. Harassment that may cause spiritual or emotional abuse is also not acceptable behavior.

The guidelines below are given to minimize any chance of abuse occurring and protect you from any false accusations of abuse or appearance of wrongdoing.

1. Campers should **not share bunks** with other campers or staff.
2. Staff should try to **avoid being alone** in a cabin with just one camper.
3. **“One on one”** counseling can be risky. Try to have another adult present or at least counsel in a place you can be in view of others.
4. **Physical punishment** and **verbal abuse** by staff or campers will not be tolerated.

CHURCH REFERENCES:

Name of church where you are presently a member: _____ Yrs _____

Location: _____
Address City State Zip

Personal reference #1 _____ Phone _____
 (Elder ___ Min. ___ other leader ___)

Personal reference #2 _____ Phone _____
 (Family, close friend)

If you have been with present church less than 5 years give reference for previous church.

Name of church _____ From ___/___/___ to ___/___/___

Location: _____

Personal reference _____ Phone _____
 (Elder ___ Minister ___ other leader ___)

Have you ever been charged with any kind of domestic violence, child abuse, or mistreatment of a child?
 Yes ___ No ___

Are you presently in treatment or under court supervision for use of illegal drugs or alcohol? Yes ___ No ___

I (print name) _____ authorize any references to give any information (including opinions) that they have regarding my character and fitness to work with children.

Signature _____ Date _____