

Name: _____



Inspiration Hills

Camp and
Retreat Center

Camp Application

Inspiration Hills Camp & Retreat Center

1242 280th Street

Inwood, Iowa 51240

(712) 986-5193 (866) 858-3265

FAX (712) 986-2301 • E-Mail: kristipalsma@inspirationhills.org

Directions: Fill out the application as completely and accurately as possible. Return it to Inspiration Hills ASAP to the address above. Give one enclosed reference sheet to each of your references, with the top 3 lines completed.

Tell us about yourself....

Today's Date _____

Last Name _____

First _____

Middle _____

Present Address - Until When _____?

Permanent Address _____

Cell Num. _____

Hm. Num. _____

E-Mail address _____

E-Mail address _____

CHURCH

Name and city of the church that you are attending? List your church involvement (start with most recent).

WORK HISTORY (start with most recent)

Employer _____ Phone _____
Address _____ Dates Employed _____
Job Title _____ Supervisor _____
Reason for leaving _____
Work Performed _____

Employer _____ Phone _____
Address _____ Dates Employed _____
Job Title _____ Supervisor _____
Reason for leaving _____
Work Performed _____

Employer _____ Phone _____
Address _____ Dates Employed _____
Job Title _____ Supervisor _____
Reason for leaving _____
Work Performed _____

CAMP WORK EXPERIENCE

Dates	Camp	Position	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EDUCATION

Name and Location of school	Circle year Completed by June
High School _____	11 12
College _____	1 2 3 4
Graduate School _____	1 2 3 4

Subjects of special study _____

Career Goals _____

Please List any extra curricular activities you participated in, including the most recent;

INSPIRATION HILLS TRAINING COMPLETED:

CHIP's number of years _____

REFERENCES (Name and full addresses) Exclude Relatives and Peers

Minister - Who knows you best
Name _____
Address _____
Phone _____

Professor, employer or supervisor
Name _____
Address _____
Phone _____

Character Ref. - Relationship?
Name _____
Address _____
Phone _____

Instructions for References *****
Give each reference a copy of the reference form.
Have them complete it and return it to me. My
address at the top of the reference form.

SUMMER STAFF POSITIONS

_____ Counselling Staff

SUMMER STAFF JOB DESCRIPTIONS

Camp Counselors: are responsible for the well-being and oversight of all campers who participate in planned programming. Specifics include being assigned to a camper group numbering 8 – 10 weekly, leading small group programming, assisting in the general oversight of all camp activities, working alongside other summer staff participating in planned staff development functions and spiritual growth opportunities. Responsible to Director of Ministries as well as Lodge Camp, Wilderness Camp or Day Camp Supervisors as assigned.

INFORMATION WE NEED TO KNOW....

Will you be age 18 or older by June? _____ Yes _____ No

May we contact your current employer _____ Yes _____ No

Are you prevented from lawfully becoming employed in this country?
because of Visa or Immigration Status _____ Yes _____ No

Have you been convicted of a felony or pled guilty to a crime? (A conviction
will not necessarily disqualify any application for employment.) If yes please explain _____ Yes _____ No

STATEMENT OF FAITH: Please answer the following questions on another sheet: 1) Describe what being a Christian means to your everyday life. 2) How has the Lord been working in your life this past year? 3) What are your personal goals for the summer and how do they relate to your future goals?

Applicant’s Statement

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as well as any individual or organization listed on this application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

STAFF APPLICATION SKILL SHEET

In the following list put 1 before activities you can organise and teach; 2 for those in which you can assist in teaching, and 3 for those with which you are slightly familiar.

SPIRITUAL

- _____ Understanding of Scripture
- _____ Small group Bible Study
- _____ Sharing my faith
- _____ Leading devotions
- _____ Leading worship

SPORTS

- _____ Badminton
- _____ Basketball
- _____ Informal Games
- _____ Ping Pong
- _____ Soccer
- _____ Track and Field
- _____ Volleyball
- _____ Mountain Biking
- _____ Base/soft ball
- _____ Tennis

AQUATICS

- _____ Canoeing
- _____ Life Saving
- _____ Waterfront Programs & Games

QUALIFICATIONS

- _____ Instructor's Qualification
- _____ National Lifeguard Service
- Other cert.: _____

Include copies of all current certification

CAMP CRAFT & PIONEERING

- _____ Camp Crafts
- _____ Backpacking
- _____ Hiking
- _____ Orienteering
- _____ Outdoor cooking
- _____ Overnight Camping

MEDIA

- _____ Video production
- _____ Webpage production
- _____ Audio recording
- _____ Newspaper publishing
- _____ Other - Explain

ARCHERY

- _____ Badges
- _____ Years Experience

ARTS AND CRAFTS

- _____ Ceramics
- _____ Leather Works
- _____ Folk Lore
- _____ Nature craft
- _____ Newspapers
- _____ Painting
- _____ Photography
- _____ Dark room
- _____ Plastics
- _____ Sculpture
- _____ Weaving
- _____ Woodcarving
- _____ Woodworking

MUSIC AND DRAMA

- _____ Lead Singing
- _____ Play Guitar
- _____ Play Piano
- _____ Direct/Plan Skits
- _____ Story Telling

NATURE

- _____ Animals
- _____ Astronomy
- _____ Birds
- _____ Conservation
- _____ Flowers
- _____ Forestry
- _____ Insects
- _____ Rocks and Minerals
- _____ Trees and Shrubs
- _____ Weather

MISCELLANEOUS

- _____ First Aid
- _____ CPR Training

HORSEMANSHIP

- _____ CHA Training
- _____ Horse owner

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 712-986-5193 ♦ 866-858-3265 ♦ Fax 712-986-2301

Summer Staff Recommendation Form

Applicant: Name _____ **Position** _____

Inspiration Hills has always taken a great responsibility in spreading the Love of Christ to our campers, and ensuring a safe environment for campers to learn and grow. To ensure that our summer staff has this ability, we ask you to please take the time to fill out this recommendation form. Please evaluate the applicant as you have seen them at church or in daily living. Thank you for your time.

Please rate the applicant on the following:

	Excellent	Good	Average	Unsure
Character:	___	___	___	___
Attitude:	___	___	___	___
Communication:	___	___	___	___
Adaptability:	___	___	___	___
Dependability:	___	___	___	___
Emotional Stability:	___	___	___	___
Spiritual Commitment:	___	___	___	___

Have you ever observed the applicant working with children or youth? ___ YES ___ NO

If yes, please describe your observations: _____

Have you seen this person demonstrate teamwork and/or leadership abilities ___ YES ___ NO

If yes, please describe: _____

How long have you known the applicant? _____

In what capacity? _____

Please share any other information that would be useful in this decision process: _____

I would.... ___ **Highly recommend the applicant** ___ **Recommend the applicant**
 ___ **Recommend the applicant with reservations** ___ **I do not recommend the applicant**

Submitted by:
Name: _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____

___ **I would prefer to discuss this further by phone**

INSPIRATION HILLS

BACKGROUND INVESTIGATION CONSENT

I, _____, hereby authorize Inspiration Hills and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the tenure of my employment with Company.

I release Company and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name (Printed)

Maiden Name or Other Names Used

Present Address How Long?

City/State Zip?

Phone?

Former Address How Long?

City/State Zip?

*Date of Birth

Social Security Number

Driver's License Number

State of License

Signature

Date

*NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. Company is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age (40 and over), Handicap or National Origin.

Position applied for: _____