

Inspiration Hills – Summer Staff Re-Application

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.

PERSONAL INFORMATION....

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;

REFERENCES (Name and full addresses) Exclude Relatives and Peers

Minister - Who knows you best	Professor, employer or supervisor
Name _____	Name _____
Address _____	Address _____
Phone _____	Phone _____

Character Ref. - Relationship?

Name _____

Address _____

Phone _____

SUMMER STAFF POSITIONS (Mark 1st & 2nd choices)

_____ Counselling Staff	_____ Lodge Camp Coordinator	_____ Ropes Course Facilitator
_____ Day Camp Coordinator	_____ Videographer	_____ Worship Leader
_____ Wilderness Coordinator	_____ Saddle Up Camp Coordinator	_____ Chaplain
_____ CHIP's Co-coordinators (Male _____ Female _____)		

INFORMATION WE NEED TO KNOW....

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

Are you are currently employed? _____ 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 within the last 7 years? (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) How has the Lord been working in your life since camp last year. 2) Indicate what motivated you to apply, and/or what your goals are for the summer.

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

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: _____

Inspiration Hills
1242 280th Street, Inwood, IA 51240
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