

**Barbara C. Harris Camp and Conference Center**

**2006 Summer Camp Employment Application**

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**General Information**

Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Age as of July 1, 2006: Under 18 \_\_\_ 18 to 20 \_\_\_ 21 or older \_\_\_

Home Address

Street/PO Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

School Address

Street/PO Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

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**Education**

High School                      City                      State                      Graduation Year

\_\_\_\_\_

\_\_\_\_\_

College                      Major                      Years Attended                      Degree Granted

\_\_\_\_\_

\_\_\_\_\_

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**Past Employment**

Employer (Last three years/summers)      Address                      Position                      Dates

\_\_\_\_\_

\_\_\_\_\_

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### Camp Experience

Camper or Staff	Camp	City & State	Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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### Certifications/Licenses

Please check any current certifications/licenses

<input type="checkbox"/> Lifeguard	<input type="checkbox"/> Water Safety Instructor	<input type="checkbox"/> Canoeing	<input type="checkbox"/> Kayaking
<input type="checkbox"/> Archery	<input type="checkbox"/> Rock Climbing	<input type="checkbox"/> High Ropes Course	
<input type="checkbox"/> First Aid	<input type="checkbox"/> Wilderness First Aid	<input type="checkbox"/> Wilderness First Responder	
<input type="checkbox"/> CPR	<input type="checkbox"/> CPR for Professional Rescuer		
Health Care Professional: <input type="checkbox"/> MD <input type="checkbox"/> RN <input type="checkbox"/> LPN <input type="checkbox"/> EMT			

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### Knowledge & Skills

Please rate your skills in each of the following areas so that we can identify where you might best fit in our program.

Blank – no skills      1 – some skills      2 – good skills      3 – strong skills

<input type="checkbox"/> Archery	<input type="checkbox"/> Crafts
<input type="checkbox"/> Basketball	<input type="checkbox"/> Pottery
<input type="checkbox"/> Softball	<input type="checkbox"/> Woodworking
<input type="checkbox"/> Soccer	<input type="checkbox"/> Painting/Drawing
<input type="checkbox"/> Lacrosse	<input type="checkbox"/> Music
	<input type="checkbox"/> Dance
<input type="checkbox"/> Swim Lessons	<input type="checkbox"/> Theater
<input type="checkbox"/> Lifeguarding	
<input type="checkbox"/> Canoeing	<input type="checkbox"/> Bible Study
<input type="checkbox"/> Kayaking	<input type="checkbox"/> Worship Leader
<input type="checkbox"/> Rock Climbing	<input type="checkbox"/> Nature Study
<input type="checkbox"/> Low Ropes Course	<input type="checkbox"/> Hiking
<input type="checkbox"/> High Ropes Course	<input type="checkbox"/> Backpacking
	<input type="checkbox"/> Bike Touring
	<input type="checkbox"/> Mountain Biking

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How did you hear about the camp?

Why do you want to work at the camp?

What position are you applying for? Why?

What experiences have you had that would help you be successful working at camp?

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What church do you attend...

at home: Church \_\_\_\_\_ City/State \_\_\_\_\_  
at school: Church \_\_\_\_\_ City/State \_\_\_\_\_

What other religious organizations are you/have you been involved with?

Briefly describe your own personal Christian experience:

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### References

Please provide three references who know you well and can provide the camp with insight into your character, faith and suitability for this position. References should include your priest/pastor and at least one present or past employer.

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street/PO Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street/PO Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street/PO Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

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Have you ever been convicted of a felony? No \_\_\_ Yes \_\_\_

Have you ever been convicted of a crime related to child or sexual abuse? No \_\_\_ Yes \_\_\_

Have you been convicted of a crime related to drug or alcohol use? No \_\_\_ Yes \_\_\_

Are there any other reasons to question your suitability for working with children in a Christian camp? No \_\_\_ Yes \_\_\_

If the answer to any question is yes attach a statement explaining the circumstances.

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To the best of my knowledge all statements on this application are correct. I understand that if I have given false information on this application I may be subject to termination.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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Return your complete application to:

John Erdman  
The Barbara C. Harris Camp & Conference Center  
PO Box 204  
Greenfield NH 03047