**Lake View Camp Summer Staff Application**

*(Please type or print application.)*

**Directions**: Fill out the application as completely and accurately as possible. Return application to the address provided. Give one enclosed staff reference sheet (see last page) to each of your 3 references, *with the top line completed*. Your references can mail, email, or fax their completed reference form to Lake View Camp.

**Our Mission Statement:** To provide a broken world with an environment where lives encounter God’s love and are being transformed by the hope that Christ gives.

**Camp Counselor Job Description**: Lake View Camp Counselors are responsible for the well-being and oversight of all campers. This includes leading a small group of campers through daily activities such as worship, meal times, recreational activities, cabin devotions, Bible studies, games, and more. Counselors are expected to spend time and interact with the campers in all activities, provide constant supervision, ensure safety, and build friendships with campers and staff. Counselors are also responsible for the setting up and taking down of camp at the beginning and end of each camp. Prayer, unity, and flexibility are three goals we have for counselors. Prayerfully support the staff and campers, create a unified staff, and be flexible to change and the Holy Spirit’s guidance. Lake View seeks to have a Christ-centered staff who is committed to serving God and His children. Lake View Camp Counselors are privileged to serve God and to be used by Him “an environment where lives encounter God’s love and are being transformed by the hope that Christ gives”.

**Date of Application:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date \_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year in College \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School or Current Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Number & Street City State Zip

Permanent Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Number & Street City State Zip

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Starting May 22 through August 13. First two weeks will be Staff Training.)*

Dates available to work: \_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_

Time off request(s) & reason *(time off not guaranteed*

*until approved)*:

**Education:** High School and Beyond

|  |  |  |  |
| --- | --- | --- | --- |
| **Years** | **School** | **Major Subjects** | **Degree (If Applicable)** |
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What career do you hope to pursue once you are finished with your education? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Christian Education:** (Check all that apply)

\_\_ Independent Bible Study \_\_ Campus Ministry \_\_ College Course(s) ­­

\_\_ Small Group Bible Study \_\_ Bible School \_\_ Seminary \_\_ Other

**Church/Campus Ministry Experience**: List the name and city of the church or campus ministry you are attending. List your church or campus ministry involvement (beginning with the most recent).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Past Work History:** Provide a full record of all employment—paid and volunteer—and explain any gaps in employment. Please do not include positions on camp staff in this section. Use a separate sheet, if necessary.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Dates** | **Employer/Supervisor** | **Address & Phone** | **Nature of Work** | **Reason for Leaving** |
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Indicate any employer you **do not** want us to contact and the reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Camp Experience:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates** | **Camp, Director, and Location** | **Camper or Staff?** | **Work Performed (If Applicable)** |
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Write a brief biographical sketch, including specialized training or experience in camping, and experience or training in other fields which might have a bearing on the position for which you are applying. Attach a separate sheet if necessary.

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List any personal skills or hobbies you feel would benefit Lake View Camp. (Example: singing, musical instruments, fishing, photography, storytelling, etc.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Certifications:** In the following list, please state if you are certified and the expiration date of each applicable certification. Please attach a copy of your *current* certification.

CPR \_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Aid \_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lifeguard \_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CNA \_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other \_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you interested in becoming certified as a Lifeguard? *(Certification will take place during Staff Training.)* \_\_\_\_

Are you prevented from lawfully becoming employed in this country? □ Yes □ No

 If yes, why? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been convicted of a felony or plead guilty to a crime? (A conviction does not □ Yes □ No

necessarily disqualify any application from employment.)

If yes, why? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After reading Lake View’s Mission Statement and the job description, are you able □ Yes □ No

to perform the essential functions of the job for which you are applying, with or

without reasonable accommodations? Explain if necessary.

**References:** Send the Reference Form (attached) to these people. **EXCLUDE** relatives and peers.

Ministry/Pastoral Reference (pastor, minister, priest, youth director, ect. who knows you best)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Character Reference

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship between you and the individual \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Professor, Employer, or Supervisor

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship between you and the individual \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please answer the following questions on another sheet of paper and submit with your application.**

1. In your own words, describe the Gospel and how it affects your everyday life.
2. *“Now there are varieties of gifts, but the same Spirit; and there are varieties of service, but the same Lord; and there are varieties of activities, but it is the same God who empowers them all in everyone. To each is given the manifestation of the Spirit for the common good. For to one is given through the Spirit the utterance of wisdom, and to another the utterance of knowledge according to the same Spirit, to another faith by the same Spirit, to another gifts of healing by the one Spirit, to another the working of miracles, to another prophecy, to another the ability to distinguish between spirits, to another various kinds of tongues, to another the interpretation of tongues. All these are empowered by one and the same Spirit, who apportions to each one individually as He wills.”*

What does this passage from 1 Corinthians 12.4-11 mean to you?

1. How has God been working in your life this past year?
2. What are your personal goals for the summer, and how do they relate to your future goals?
3. What is your opinion on:
	1. The authority of Scripture
	2. Alcohol consumption
	3. Homosexuality
4. Why do you want to be a camp counselor at Lake View Camp this summer?
5. What experience do you have working with kids (kindergarten-high school)?
6. What age groups do you prefer to work with or not work with? Why?

**Applicant’s Statement**

*Please initial each of the following statements:*

\_\_\_\_ I declare that all the statements given in this application 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.

\_\_\_\_ I understand that I must be interviewed before I begin my employment with Lake View Camp.

\_\_\_\_ I understand that I can withdraw from the application process at any time.

\_\_\_\_ I understand that any false or misleading information given in this application or interview(s) may result in discharge.

\_\_\_\_ If employed, I agree to read and abide by Lake View Camp’s Statement of Faith and Conduct Policy.

\_\_\_\_ I desire to serve God and His children and to be used by Him in “an environment where lives encounter God’s love and are being transformed by the hope that Christ gives”.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**Please send in completed application to:**

Lake View Camp

c/o Hannah Schwab

P0 Box 836

Pella, IA 50219

**Summer Staff Reference Form**

PO Box 836 ● Pella, IA 50219

(641) 628-2160 ● Fax: (641) 628-2160

outreachlakeview@gmail.com ● www.lakeviewconference.com

Applicant Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Lake View Camp 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 reference form. Please evaluate the applicant as you have seen them at church, work, 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 \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Spiritual Commitment \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

1. Have you ever observed the applicant working with children or youth? □ Yes □ No

 If yes, please describe your observations:

2. Have you seen the applicant demonstrate teamwork and/or leadership abilities? □ Yes □ No

 If yes, please describe:

3. How long have you known the applicant, and in what capacity?

4. How does the applicant respond to supervisors in directive roles?

5. Please share any other information that you feel would be useful in this decision-making process.

6. I would… \_\_\_\_\_ Highly recommend the applicant \_\_\_\_\_ Recommend the applicant

 \_\_\_\_\_ Recommend the applicant with reservations \_\_\_\_\_ Not recommend the applicant

Submitted by:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ I would prefer to discuss this further by phone

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Character \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Attitude \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Communication \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Adaptability \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Dependability \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Spiritual Commitment \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

1. Have you ever observed the applicant working with children or youth? □ Yes □ No

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2. Have you seen this person demonstrate teamwork and/or leadership abilities? □ Yes □ No

 If yes, please describe:

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4. How does the applicant respond to supervisors in directive roles?

5. Please share any other information that you feel would be useful in this decision-making process.

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 \_\_\_\_\_ Recommend the applicant with reservations \_\_\_\_\_ Not recommend the applicant

Submitted by:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

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Character \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Attitude \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Communication \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Adaptability \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Dependability \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Spiritual Commitment \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

1. Have you ever observed the applicant working with children or youth? □ Yes □ No

 If yes, please describe your observations:

2. Have you seen this person demonstrate teamwork and/or leadership abilities? □ Yes □ No

 If yes, please describe:

3. How long have you known the applicant, and in what capacity?

4. How does the applicant respond to supervisors in directive roles?

5. Please share any other information that you feel would be useful in this decision-making process.

6. I would… \_\_\_\_\_ Highly recommend the applicant \_\_\_\_\_ Recommend the applicant

 \_\_\_\_\_ Recommend the applicant with reservations \_\_\_\_\_ Not recommend the applicant

Submitted by:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ I would prefer to discuss this further by phone

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