

Girl Scouts of the Sierra Nevada  
**RETURNING CAMP STAFF APPLICATION 2008**

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

Camp name \_\_\_\_\_ Position last year \_\_\_\_\_

Present address \_\_\_\_\_

At present address until? \_\_\_\_\_ Day phone ( ) \_\_\_\_\_ Evening phone ( ) \_\_\_\_\_

Cell phone ( ) \_\_\_\_\_ E-mail address \_\_\_\_\_

Permanent address \_\_\_\_\_

Present occupation or year in school \_\_\_\_\_ Dates available: from \_\_\_\_\_ to \_\_\_\_\_

When is the best time to reach you to schedule an interview? \_\_\_\_\_

**CAMP POSITION DESIRED:** [indicate 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice]

*Note: Positions have minimum age requirements. See **Positions Available 2008** for specific information.*

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Do you meet or exceed the minimum age requirements for the position(s) for which you are applying? [ ]Yes [ ]No

Can you perform the essential functions of the position(s) for which you are applying, with or without reasonable accommodation? [ ]Yes [ ]No

**CURRENT CERTIFICATIONS:**

<i>exp. date</i>	<i>exp. date</i>	<i>exp. date</i>
_____ Water Safety Instructor	_____ Archery	_____ Wilderness First Aid
_____ Certified Lifeguard	_____ Standard First Aid	_____ Emergency Response
_____ Swimming Instructor	_____ Basic Life Support	_____ ACA Outdoor Living Skills
_____ Canoe Instructor	_____ CPR (type _____)	_____ Other _____
_____ Small Craft Instructor	_____ EMT (level _____)	_____ Other _____

Describe any classes or training that you have taken since last summer that will be helpful for the camp staff position for which you applying.

What certifications do you plan on obtaining prior to camp and when?

**ADDITIONAL INFORMATION:** Please answer the following questions. Attach additional sheets if needed.

1. Why do you wish to return to camp?
2. If you could do one thing differently from last summer, what would it be?
3. Describe any relevant experience you have had with children since last summer.

Do you have a current Driver's License? [ ] Yes [ ] No State \_\_\_ I.D. Number \_\_\_\_\_ Class \_\_\_\_  
 Do you have any moving violations? [ ] Yes [ ] No If yes, please explain: \_\_\_\_\_

Have you ever been convicted of a crime (other than traffic violations)? [ ] Yes [ ] No  
 If yes, please state offense, date, location, and explanation of the incident. Use additional paper if needed. A conviction record will not necessarily be cause for disqualification. \_\_\_\_\_

**REFERENCES:**

If you are applying for a new position, please list one reference **who is not related to or living with you** and who can verify your qualifications for the position(s) for which you are applying. Give the reference form to the person listed below and ask them to return the completed form **directly to Girl Scouts of the Sierra Nevada**. Additional reference forms can be downloaded at [www.gssn.org/camp](http://www.gssn.org/camp). Your application can not be considered until this reference has been received.

Name	Complete Address including city, state, and zip code	Phone Number	Title/Position
		( )	

I hereby authorize Girl Scouts of the Sierra Nevada (GSSN) to contact any individuals or organizations identified in this application to verify information provided and to obtain additional information if needed. \_\_\_\_\_(initials)

**I understand the following are conditions of employment:**

- I must provide two of the following forms of identification:  
 a) Birth Certificate b) Driver's License c) Visa, if non-U.S. Citizen d) Social Security Card \_\_\_\_\_(initials)
- Satisfactory completion of a physical examination. \_\_\_\_\_(initials)
- Completion of a fingerprint and background check. \_\_\_\_\_(initials)

**I understand:**

- GSSN is an at-will employer and that any individual who is hired may be terminated by GSSN at any time for any reason without advance notice. \_\_\_\_\_(initials)
- Misrepresentations, omission of facts, or falsifications herein or in any other documents completed or submitted by the applicant will be cause of rejection of this application and disqualification for employment, or dismissal after employment, regardless of the date of discovery by the GSSN. \_\_\_\_\_(initials)

I certify that all the information provided on this application is true and complete, and that I have not knowingly withheld any information, which might, if disclosed, affect my application unfavorably. I authorize investigation of all statements herein, including references and any checks of criminal records, and release Girl Scouts of the Sierra Nevada and all others from liability in connection with the same.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Applicant: \_\_\_\_\_

MAIL COMPLETED APPLICATION TO:  
 Girl Scouts of the Sierra Nevada  
 Attn: Camp Director  
 605 Washington St, Reno, NV 89503  
 or fax to 775-322-0231