

Brookside Outdoor Center

STAFF APPLICATION FORM 2011

Please print or type.

SECTION 1 - PERSONAL INFORMATION *to be completed by all applicants*

Name _____

Address _____

Street

City

Province

Postal Code

Telephone Number _____ Email _____

Permanent Address - if different from above:

Street

City

Province

Postal Code

Phone #

Birth Date _____ Social Insurance Number _____
Day/Month/Year

Position applying for:

- _____ Junior Counselor (16 – 17 yrs old) (Volunteer position)
_____ Senior Counselor (age 18+)

Dates available:

- _____ Skills & Leadership camp July 3-8
_____ Pioneer camp July 10 – 16
_____ Quebec Lodge day camp week one
_____ Quebec Lodge day camp week 2
_____ Wilderness survival camp
** All staff must attend pre camp training June 29 – July 3 **

Language Spoken: English _____ Some / Well / Fluently
French _____ Some / Well / Fluently
Other _____

Church Affiliation:

Denomination to which you belong _____
Local Church _____

Education:

High School _____
School / Graduation Date

CEGEP/College _____
School/ Program/ Graduation Date

University _____
School/ Degree or Program/ Graduation Date

Work Experience:

Camp Experience:

Have you ever attended camp as a camper? For how long? _____
Which camp? _____

Volunteer Experience:

Have you held positions of responsibility or done volunteer work at school, church, or in the community? Yes / No
Please elaborate:

(Use extra paper if needed)

Do you smoke? Yes / No

Illegal drug use Yes / No

Will you consent to random drug testing Yes / No

Do you have a criminal record? Yes / No

SECTION 2

Please include photocopies of all relevant certificates & qualifications.

Have you ever been part of a group that studied the Bible? Yes / No
If so, please give the name of the group and describe:

Have you taken any Bible or small group leadership courses? Yes / No
If so please give the name of the course and a brief description:

Have you ever led a Bible Study? Yes / No
If so please describe:

Please circle any of the following activities in which you would say you have some proficiency; place an "L" beside those activities that you would be prepared to lead, and a "T" beside those activities which you would be prepared to teach.

(Please add any activities that are not mentioned in which you have some proficiency on the lines provided)

Arts & Crafts	Archery	_____
Basketball	Canoeing	_____
Dodgeball	Drama/Mime	_____
Face Painting	Fishing	_____
Hiking	Football	_____
Leading Campfire	Knot Tying	_____
Outdoor Cooking	Puppet making	_____
Rowing	Singing	_____
Soccer	Soccer baseball	_____
Softball	Swimming	_____
Volleyball	Camp Craft	_____
Survival skills	Nature study	_____

SECTION 3

Please list any teams that you have been a part of, or courses that you have taken, in the activities that you would be prepared to lead or teach:

Other Qualifications: *(Please list)*

Swimming &/or Life Saving _____

Canoeing _____

First Aid _____

Other _____

Please describe any work that you have done with children that has not already been described:

SECTION 4

Please respond clearly to the following items on a separate piece of paper:

1. Please state what makes you want to apply to be on staff at Brookside.
2. Please explain what you think it means to be a Christian.
3. Do you call yourself a Christian? Yes / No

SECTION 5

Please supply the names and addresses of three people who know you well, one of whom should be your pastor or priest. Immediate members of your family ie, parents, siblings, spouse, aunts, uncles, cousins, grandparents may not be used.

Name _____

Address _____

Tel _____ Position _____

Name _____

Address _____

Tel _____ Position _____

Name _____

Address _____

Tel _____ Position _____

If possible, please enclose a recent photo of yourself with your name on the back. (*New staff only- this helps if we have to meet you somewhere*).

Please note: All staff, 18 years old and over, are required to produce a Police Record Check.

Returning staff are only required to renew this once every five years.

To the best of my knowledge, the information given on this form is accurate and I give permission to Brookside to verify this information.

Signature of Applicant/ Date

I have read the Brookside Mission Statement and policies on Alcohol, Drugs, and Sexual Relations, and agree to honor them if selected to serve on staff.

Signature of Applicant/ Date

or

I consent to my child serving on staff at Brookside and have read the Staff Policies.

Signature of Applicant's Parent (if applicant is under 18)/ Date

Please return completed forms to:
Brookside Outdoor Center
817 chemin Sheldon
Fitch Bay, QC
J1X 3W4
819-572-8404