

YMCA Camp TORYMCA

Winsted Branch (860)379-0708

Torrington (860)489-3133

FAX: 860 482-4853

STAFF APPLICATION

Name _____ Social Security Number _____

Home Address _____

City _____ State _____ ZIP _____

College/Alternate Address _____

City _____ State _____ ZIP _____

Email Address _____

Home Phone _____ College/Alt Phone _____

Age (Some positions at Camp TORYMCA have minimum age requirements) ___over 16 ___over 18

___Over 21(Requirements are listed in a detailed job description - provided upon request)

EDUCATION:

High School _____ Years Completed 1 2 3 4

College _____ Years Completed 1 2 3 4 Other: _____

EMPLOYMENT: (List most recent first)

1. Company Name: _____ Phone: _____ Dates of Employment: _____

Address: _____ Name of Supervisor: _____

Job Title/Description: _____ Reason for Leaving _____ Pay: _____

2. Company Name: _____ Phone: _____ Dates of Employment: _____

Address: _____ Name of Supervisor: _____

Job Title/Description: _____ Reason for Leaving _____ Pay: _____

3. Company Name: _____ Phone: _____ Dates of Employment: _____

Address: _____ Name of Supervisor: _____

Job Title/Description: _____ Reason for Leaving _____ Pay: _____

Please return this application to YMCA Camp TORYMCA, 259 Prospect Street, Torrington, CT. This application does not obligate you to work at TORYMCA in 2003.

May we contact your previous employers? _____ Yes _____ No

If no please explain reason and which employers not to contact: _____

SKILLS AND INTERESTS:

Place a (1) next to activities you can teach (2) next to activities you can assist with and (3) next to activities of interest

- | | | | |
|------------------|-----------------------|----------------------|-------------------|
| ___ Archery | ___ Canoeing | ___ Swimming | ___ Painting |
| ___ Basketball | ___ Rowing | ___ Water Games | ___ Pottery |
| ___ Soccer | ___ Fishing | ___ Snorkeling | ___ Weaving |
| ___ Baseball | ___ Hiking | ___ Water Safety | ___ Camp Crafts |
| ___ Volleyball | ___ Nature | ___ Lifeguarding | ___ Drawing |
| ___ Field Sports | ___ Cycling | ___ First Aid/CPR | ___ Photography |
| ___ Newspaper | ___ Computers | ___ Dance | ___ Rock Climbing |
| ___ Caving | ___ Group Initiatives | ___ Trust Activities | ___ Other |

Please list your top three choices of camper groups you wish to work with

- | | |
|---|---|
| _____ 4 & 5 year olds | _____ Adventure Camp 7 th thru 9 th grade |
| _____ 1 st and 2 nd grade | _____ CIT 10 th grade |
| _____ 3 rd and 4 th grade | _____ Children with disabilities |
| _____ 5 th and 6 th grade | |

Dates available to work: From: _____ To: _____

Relevant Certifications (lifeguarding, boating, archery, First Aid/CPR, etc.) _____

Personal References

Name _____ Phone _____

Address _____

Street City State ZIP

Name _____ Phone _____

Address _____

Street City State ZIP

Name _____ Phone _____

Address _____

Street City State ZIP

Statement of Application

Working at Camp Tormymca demands of you an unselfish attitude, sense of humor, a high energy level and a genuine concern for the positive development of children. Your concerns and efforts must always be directed toward the physical and psychological welfare of campers. Though the management at Tormymca is very supportive, it is important that you recognize that camp counseling is a responsible job requiring a high level of care and commitment.

Were you ever convicted of a crime?_____ If yes, please describe in full detail on a separate sheet.

YMCA Camp Tormymca will conduct an extensive inquiry into all applicants' backgrounds. This search may include but will not be limited to confirmation of references, employment history, home address verification, conviction history information and fingerprinting.

I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my being considered for employment or after employment, may be cause for termination of employment with YMCA Camp Tormymca.

I understand that Camp Tormymca will take any allegations or suspicions seriously and will report such allegation to the police and state agencies for investigation. I also understand that if hired as a YMCA employee, I am not allowed to fraternize with campers outside of camp programs.

I understand that my possible employment is contingent upon a physician's statement showing me in good health and a clean criminal history background check.

Signature of Applicant

Date

For Office Use Only

Date application received_____ Criminal History Check_____ Fingerprint Check_____

Date references sent_____

Date references received_____

Date references confirmed_____

Position offered_____ Salary Offered_____

Contract Sent_____ Date contract Due back_____ Contract Received_____

www.northwestctymca.org