

Camp Staff Application

Northern Michigan Church of the Nazarene
Mail Application To: P.O. Box 2457
Petoskey, MI 49770

Personal

Name: _____ Sex _____ DOB _____ Daytime telephone: _____

Address: _____ Email: _____

Age range: under 18 18-25 over 25

All workers must get a DHS 194 form from their local Department of Human Services, complete it and turn back in to DHS. DHS will mail back the 194 Form which must be attached to your application. Completed: Yes No

In which position are you applying for? _____

What skills would you bring to the children's camp? _____

What other children work experience do you have?

Organization	Program	Dates	Contact
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you at any time ever:

- ❖ Been arrested for any reason? Yes No
- ❖ Been convicted of, or pleaded no contest to, any crime? Yes No
- ❖ Engaged in, or been accused of, any child molestation, exploitation, or abuse? Yes No

Are you aware of:

- ❖ Having any traits or tendencies that could pose any threat to children and others? Yes No
- ❖ Any restrictions because of physical or mental illness? Yes No
- ❖ Any reason why you should not work with children and others? Yes No
- ❖ Are there physical limits, allergies, or special health considerations we need to know about? Yes No

If the answer to any of these questions is "yes," please explain in detail: _____

(Please attach additional pages if more space is needed)

Church Activity

What church or churches have you attended in the past five years?

Church name	Pastor's name	Years attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

References (Other than relatives)

Name/Relationship	Address	Phone
Pastor_____	_____	_____
Recommendation_____	_____	_____
Non-family member_____	_____	_____
Recommendation_____	_____	_____
Non-family member_____	_____	_____
Recommendation_____	_____	_____

Applicant Verification and Release

I recognize that the organization to which this application is being submitted is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct. I release and forever discharge the Church of the Nazarene and/or any and all branches, officers or representatives from any and all claims, demands, damages, actions, and causes of action, whatsoever, which may arise by reason of any loss, damage, injury, including death through any accident in traveling to and/or from any Summer Camp, or while in attendance at any Summer Camp, over and above our proportionate share of any Insurance coverage that the said operator of the Summer Camp have established.

I authorize the organization to contact any person or entity listed in this application, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release the organization and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.

I agree with the policy and procedure of the organization, and I agree to abide by them and to protect the health and safety of the children at all times.

Printed name: _____

Signature: _____ Date: _____