



Camp Counselor Application Due June 30th, 2022

Instructions:

1. Fill out the application completely.
2. Sign & date last page.
3. Return to Lisa@candlelightersoregon.org

Candlelighters For Children With Cancer is an Equal Opportunity Organization. We select counselors without regard to ethnicity, national origin, religion, age, education, sexual orientation, mental or physical disability unrelated to job performance.

Name (last, first & middle): _____

Date of Birth: _____

Address: _____

City: _____ State: _____ ZIP: _____

Email: _____

Preferred Phone: _____

Emergency Contact: _____

Phone # _____ Relationship: _____

Are you bilingual? Yes _____ No _____ If yes, what languages besides English? _____

T-Shirt Size: _____

Are you a cancer survivor? (*optional*) _____ If yes, date of diagnosis: _____

Education:

High School (Highest Grade Completed): 9th _____ 10th _____ 11th _____ 12th _____

Name of School: _____ **Year Graduated:** _____

College (Number of Years Completed): 1 _____ 2 _____ 3 _____ 4 _____

Name of School: _____ **Year Degree Received:** _____

Graduate School: Status or Degree Earned: _____

Can you provide proof of full COVID vaccination prior to camp? Yes _____ No _____
(Full vaccination series plus booster)

Medical Training: List institutions, medical degrees, certifications, etc., & year received:

CPR Training: Yes _____ No _____ First Aid Training: Yes _____ No _____

Work Experience in the last 5 years (List employer, job title, years, and brief description of responsibilities):

Family Camp involves close contact with children. Have you ever been investigated for, arrested for, or convicted of:

Child Abuse, Neglect, or Related Charges: Yes _____ No _____

Drug or Alcohol Charges: Yes _____ No _____

Have you ever been convicted of any other criminal activity? Yes _____ No _____

If yes, please explain (an arrest or conviction does not automatically disqualify a candidate; each person is evaluated based upon individual circumstances):

Family Camp may require physically demanding activity including but not limited to running, lifting, and carrying. Do you have any physical limitations that would prevent you from performing the work for which you are being considered?

Yes _____ No _____

If yes, please explain:

List camp-related activities or other relevant activities in which you have a moderate or high degree of expertise and explain where/how you developed this experience:

Why do you want to be a camp counselor?

Describe any experience working with youth (be specific and include any camp experience if applicable):

Describe any experience with interacting with children with cancer, or any other experiences in which cancer has impacted your life:

How did you hear about Candlelighters Family Camp?

List any other skills you want to share that you think will be valuable to camp:

List 3 references (persons not related to you who have known you for at least 1 year):

Reference #1: _____ Relationship: _____

Phone # _____ Email: _____

Reference #2: _____ Relationship: _____

Phone # _____ Email: _____

Reference #3: _____ Relationship: _____

Phone # _____ Email: _____

I certify that all information given on this application is true and I authorize the investigation of all statements. I understand that misrepresentation of facts is cause for dismissal. I authorize Candlelighters For Children With Cancer to secure an employment screening profile including a criminal/background check and authorize the release of securing information for this purpose.

Full Name (Please Print): _____

Signature: _____ Date: _____