



(Please Type or Print)

Date of Application _____

Name _____ Social Security Number _____

Permanent Address _____
Street & Number City State Zip

Phone _____ Cell _____ E-mail _____

School or Business Address _____
Street & Number City State Zip

Phone _____ Fax _____

Dates available: From: _____ To _____ E-mail: _____

Please rank order the programs listed below with #1 being the program are most interested in. If you are not qualified for the programs with training requirements, please put a **N/C** in the blank to indicated that you need certification.

Do you wish to apply for an instructor or group leader position? Instructor _____ Group Leader _____

If you selected **Group Leader**, what age group would you like to work with? 8 9 10 11 12 13 14

Instructor Positions Available: (Minimum Age Requirement: 17)

	Rank	
Nature Seekers		
Wildlife Adventurers		
Junior Voyagers		
Rangers		Must be a FWC Hunter Safety Instructor
Trailblazers		
Explorers		
Mariners		Min. 21 yrs old
Lifeguard		Must Be Lifeguard Certified
Canoe Instructor		Must be Canoe Instructor Certified
Range Master		Must be a NADA Archery Instructor
Fishing and Sports		

Will you accept any assignment that is offered to you? Yes No

If you are applying for an instructor position, would you accept assignment as a group leader if necessary? Yes No

Would you be willing to secure certification in order to obtain a position with training requirements? Yes No

If yes, which programs?(N/A for group leader) _____

Do you meet or exceed any minimum age requirements for that position? Don't know minimum age Yes No

Can you perform the essential functions of the job for which you applied, with or without reasonable accommodation?

Yes No

Past Work History Provide a full record of all employment – paid and volunteer – and explain any gaps in employment. Include any positions on camp staff. Use a separate sheet, if necessary.

Dates	Employer/Supervisor	Address & Phone	Nature Of Work	Reason For Leaving

Indicate any employer you **do not** wish us to contact, and the reason _____

References Give names and addresses of three people [not related to you] having knowledge of your character, experience, work habits and ability.

Name	Address & City	Phone

Education High School and Beyond

Years	School	Major Subjects	Degree Granted

Camp Experience

Dates	Camp Director	Location	Camper/Staff

Write a brief biographical sketch, including specialized training in camping, and experience or training in other fields which might have a bearing on the positions(s) for which you are applying. Attach a separate sheet if necessary.

What contributions do you think you can make at camp? _____

What contributions do you think a well-run camp can make to children? _____

Camp Program Skills In the following list, put a "T" *before* those activities you can organize and teach as an expert, and an "A" for those in which you can assist. Put a "C" *after* those in which you have **current** certification and attach a copy of your certification.

Adventure/Challenge

- _____ ropes course
- _____ climbing/rappelling
- _____ spelunking/caving

Arts/Crafts

- _____ ceramics/pottery
- _____ drawing/painting
- _____ leather craft
- _____ metal work
- _____ photography
- _____ woodworking
- _____
- _____

Camp Craft/Pioneering

- _____ backpacking
- _____ camp craft
- _____ hiking
- _____ orienteering
- _____ outdoor cooking
- _____ outdoor living skills
- _____ overnights
- _____ wilderness trips
- _____
- _____

Dance (list)

- _____
- _____

Drama

- _____ clowning
- _____ theater
- _____

Music

- _____ singing
- _____ instrument (list)
- _____
- _____

Nature

- _____ animals/animal care
- _____ astronomy
- _____ birds
- _____ environmental studies
- _____ flowers
- _____ forestry
- _____ insects
- _____ rocks/minerals
- _____ weather
- _____

Sports/Fitness

- _____ aerobics/ exercise
- _____ archery
- _____ baseball/softball
- _____ basketball
- _____ bicycling/biking
- _____ boxing
- _____ fishing
- _____ football
- _____ golf
- _____ gymnastics
- _____ informal games
- _____ riflery
- _____ soccer
- _____ tennis
- _____ track/field
- _____ volleyball

Waterfront Activities

- _____ board sailing
- _____ wind surfing
- _____ canoeing
- _____ diving
- _____ kayaking
- _____ rafting
- _____ rowing
- _____ sailing
- _____ SCUBA
- _____ swimming
- _____

Miscellaneous

- _____ academics
- _____ aviation
- _____ community service
- _____ foreign language
- _____ leadership development
- _____ Junior Staff
- _____ radio/TV/video
- _____ storytelling
- _____ team building
- _____
- _____

Certifications and Camp Support Staff Skills In the following list, please check those items in which you have experience and skills. Mark with a "C" those for which you hold current certification and attach a copy of your certification

Business/Administration

- _____ bookkeeping/accounting
- _____ computer/technical
- _____ computer/software (list)
- _____
- _____

Health/Safety

- _____ CPR
- _____ First aid
- _____ Lifeguard
- _____ Nursing
- _____
- _____

Maintenance

- _____ auto mechanics
- _____ carpentry
- _____ electrical
- _____ plumbing
- _____
- _____

Food Service

- _____ cooking/meal preparation
- _____ Food Handler's Permit/Cert.
- _____ menu planning
- _____ purchasing
- _____ sanitation
- _____

Answer these questions only if applying for a position requiring driving

Do you have a valid driver's license? Yes No State _____

Do you have a current chauffeur's type license? Yes No

Do you have a commercial driver's license? Yes No

Harassment The camp's policy is to prohibit all forms of harassment by our employees. This includes sexual, racial, religious, and other forms of harassment. Have you ever been accused of harassment of any person including, but not limited to, workplace harassment? (Note: a prior accusation is not an automatic bar to employment. The type of accusation and when it occurred will be evaluated by the camp before any decision is made.) Yes No

Explain if you answered yes: _____

Criminal Record Have you ever been convicted of a crime, other than a minor traffic offense? If yes, please describe. (Note: a prior conviction is not an automatic bar to employment. The type of conviction and when it occurred will be evaluated by the camp before any decision is made.) Yes No

Explain _____

I authorize investigation of all statements herein, including any checks of criminal records, and release the camp and all other from liability in connection with same. I understand that, if employed, I will be an at-will employee unless there is an agreement or law which alters that status. Furthermore, I understand that any agreement must be in writing and signed by the designated camp official. I also understand that misrepresentations or falsifications herein or in other documents completed or submitted by me will result in the dismissal, regardless of the date of discovery by the camp.

Signature _____ Date _____

**EYCC - DRUG TESTING PARTICIPATION AGREEMENT
(FOR STAFF UNDER 18)**

I _____ (Name of Parent/Guardian) hereby declare
that my son/daughter, (Name) _____ is under the age of eighteen years old.

I understand and agree to the fact that as part of the Everglades Youth Conservation Camp's Operational Policies and Procedures, along with requirements from the Children's Services Council, my son/ daughter will be required to take part in a random drug testing program during their period of employment.

Signature of Parent: _____

Print Name: _____ Date: _____

**EYCC - DRUG TESTING PARTICIPATION AGREEMENT
(Staff 18 and Over)**

I understand and agree to the fact that as part of the Everglades Youth Conservation Camp's Operational Policies and Procedures, along with requirements from the Children's Services Council, I will be required to take part in a random drug testing program during my period of employment.

Signature of Employee: _____

Print Name: _____ Date: _____

PRIVATE VEHICLE USE

In the event of an emergency we will need to transport all campers to our evacuation site located at Frontier Elementary School located on 180th North in Loxahatchee. We will need to use all available cars for transportation. If you have a vehicle that can be used for this purpose, please complete the bottom of this sheet and return.

Please check:

___ I give permission for my vehicle to be used by the Everglades Youth Conservation Camp to transport campers from the camp to Frontier Elementary School (Red Cross Shelter).

___ My vehicle may also be used in an emergency to transport a camper(s) to the emergency room at Palm's West hospital.

Signature

Print Name

Date _____

Type of vehicle _____

Condition of vehicle _____

Number of Seat Belts (inc. driver) _____

**DECLARATION OF WEEKEND MOVEMENTS
(FOR STAFF UNDER 18 YRS OLD)**

I, _____(Parent/Guardian) hereby declare that my
son/ daughter _____is under the age of eighteen years old.

It is with my consent that he/she will be allowed to remain on the site of the Everglades Youth Conservation Camp at times when camp is out of session.

This period includes Friday afternoon and evening when the campers have left the site until Noon on Sunday when camp sessions restart (throughout the summer months).

During this period of time I understand that there will be a senior staff member present at the camp at all times to deal with any emergency situations should they occur.

During the weekend period, I understand that camp staff will be able to come and go freely without any direct supervision according to camp Policies and Procedures. This also includes using transportation provided by their peers (other camp staff) with their own vehicles, if they so wish.

Signature of Parent: _____

Print Name: _____

Date Signed: _____

EVERGLADES YOUTH CONSERVATION CAMP 2010 STAFF CODE OF CONDUCT

Summer camp gives children an opportunity to grow and learn in a safe environment away from their parents. When parents send their child(ren) to camp, they expect the staff to uphold the highest quality of care and ethical standards. Children want and deserve a safe space, active listening, love, guidance and protection to mature. They deserve role models they can look up to, emulate and learn from. We must consider in everything we do, "Is this creating a safe space for the campers and other staff?" and "Would the parents approve of this action?"

In accepting responsibility, we must include having the courage to accept consequences when we don't fulfill that responsibility. For minor rule and regulation infractions, staff may pay a fine or lose time off. For major infractions, employment will be terminated. For staff 18 years and younger, your parents will be called if your employment is terminated.

Staff of the Everglades Youth Conservation Camp must agree to provide a safe and nurturing environment for all campers. You must be willing to adhere to all camp policies and procedures to include:

- A tobacco, alcohol and controlled substance free environment
- Use of appropriate language at all times
- Wear appropriate clothing as per staff policy, to promote safety standards
- Timeliness and attentiveness to your duties
- Take care of yourself in terms of sleep, sun protection and water consumption
- Adhere to all safety guidelines in the different activity areas
- Practice self-control and restraint to sensitive and personal issues with campers

If we each are self-responsible, challenge ourselves to perhaps make some life changes for the camp season or encourage and help others to make changes and approach this experience with the good of the camp community in mind, it will be a summer to remember forever.

The Everglades Youth Conservation Camp participates in a random drug testing program for all of its employees as a condition of our agreement with the Children's Services Council.

If you cannot adhere to the staff policies and procedures and our STAFF CODE of CONDUCT, please do not apply for a position with the Everglades Youth Conservation Camp.

By signing below, you agree to adhere to the camp's policies and procedures and the STAFF CODE of CONDUCT as established as a condition of employment with the Everglades Youth Conservation Camp along agreement to submit to a random drug test if it is requested.

Signature:

Date:

4. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children?

Yes No

If yes, please explain: (Use a separate sheet if necessary.) _____

5. Are you now or have you ever been subjected to any court order involving sexual or physical abuse of a minor, including, but not limited to a domestic order or protection?

Yes No

If yes, please explain: (Use a separate sheet, if necessary) _____

6. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children?

Yes No

If yes, please explain: _____

I understand that:

a. The camp may deny employment to any person who answers "yes" to any one of the questions 2 – 6. If hired and the employer later discovers circumstances that would indicate a "yes" answer to any of the above questions, employment may be terminated immediately.

b. The information provided on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.

c. The camp may terminate employment or volunteer service of any person if that person is found, regardless of when discovered, to:

1. have a history of complaints of abuse of a minor;
2. have resigned, been terminated or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor; and/or
3. have falsified or omitted information in this disclosure statement.

d. This disclosure statement must be updated yearly.

Signature _____ Date _____

Signature of Minor's Parent/Guardian _____ Date _____