

COUNSELOR APPLICATION 2007

PERSONAL INFORMATION

Name: _____ Male: _____ Female: _____

Age: _____

Date of Birth: ___/___/___ Weight: _____ Height: _____

University/College: _____ Class: _____ Major: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

At this address until: ___/___/___ Present Phone#:(____) _____

Permanent Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Permanent Phone#:(____) _____

Contact in case of emergency (name, relationship and phone

#): _____ Are you authorized to work in the United States?

No _____ Yes _____ Social Security Number: _____

Driver's License: No _____ Yes _____ License Number: _____ State: _____

Do you agree to abide by our smoking policy? (see Fernwood Info) No _____

Yes _____ Do you swim? No _____ Yes _____ Do you speak any foreign languages?

_____ Do you have any special health or

physical needs? Please describe: _____ Do you have any special dietary

needs? Please describe: _____

REFERENCES: In addition to having the attached written reference from completed, please provide the names and phone numbers of two people (who are not related to you) who can tell us about your work experience, character and activity skill level:

Reference #1 Reference #2

Name: _____ Name: _____

Position: _____ Position: _____

How does he/she know you? _____ How does he/she know you? _____

Day Phone: _____ Day Phone: _____

Eve Phone: _____ Eve Phone: _____

Please list your most recent three employments:

Employer: _____ Dates worked: _____

Contact Name: _____ Contact Number: _____

Employer: _____ Dates worked: _____

Contact Name: _____ Contact Number: _____

Employer: _____ Dates worked: _____

Contact Name: _____ Contact Number: _____

Experience: Describe any previous camp experience you have had (as a camper or as a staff member): Describe any leadership experience you have had, including volunteer positions: _____

What extracurricular activities did you participate during high school/college? What are your hobbies/interests?

Describe any experience you have had working with children: _____
What are your strongest qualities? What would you most like campers to learn from you at camp?

What would you most like to leave camp having done/learned? _____
What do you feel will be your biggest challenge at camp?

Certifications: (Please include expiration dates) Red Cross Water Safety Instructor: _____
Exp: ____/____/____ Red Cross Lifeguard (LGT) _____
Exp: ____/____/____ CPR: _____ Exp: ____/____/____ First Aid: _____
Exp: ____/____/____ Other: _____ Exp: _____
____/____/____

Are you willing to obtain necessary certifications if you do not already have them? _____
Are you available to attend our Lifeguarding and Water Safety training courses? _____

Activities:

On the following list, Please check the activities in which you feel you have some level of skill and teaching ability?

SPORTS:

Basketball ____ Field Hockey ____ Lacrosse ____ Soccer ____ Softball ____
Volleyball ____ Ultimate Frisbee ____ Gymnastics ____ Horseback Riding: ____ Archery: ____
Riflery: Aerobics: ____ Tennis: ____

MUSIC: Bugle: ____ Guitar: ____ Piano(ear player?Y/N) __ Singing ____

FOOD SERVICE: Chef ____ Baker ____ Food Prep ____

WATER SPORTS: Canoeing ____ Competitive Swim ____ Crew ____ Drive Water-ski
Boat Kayaking ____ Swim/Lifeguarding ____ Sailing Swimming(WSI) ____
Waterskiing ____ Windsurfing ____

SUPPORT ACTIVITIES: Office/Secretarial ____ Typing ____ WPM Computer
Skills ____ Bookkeeping ____ Housekeeping ____

OUTDOOR ACTIVITIES: Nature ____ Campcraft ____ Hiking/backpacking ____ Rock
Climbing ____ Ropes Course ____ Mountain Biking ____

CREATIVE/ FINE ARTS: Arts and Crafts: ____ Fashion Design/Sewing ____ Ceramics:
____ Woodworking: ____ Silversmithing: ____ Painting: ____ Drawing: ____

Photography: ____ Screen Printing: ____ Dance: Tap ____ Dance: Ballet ____ Dance:
Jazz ____ Dance: Hip Hop ____ Drama/Theatre ____

OTHER: _____

ACTIVITIES SKILLS List your three strongest activity skill areas:

1. _____ Can you teach/lead/or assist? _____

Experience: _____

2. _____ Can you teach/lead/or assist? _____

Experience: _____

3. _____ Can you teach/lead/or assist? _____

Experience: _____

Is there any other information that you would like us to have?

All counselors are contracted from June 16 to August 12, 2007. All staff are expected to have a health examination form completed by their physician to camp:

Can you meet these dates and health requirements: Yes _____ No _____

Have you ever been charged with or convicted of any child abuse or sex related offenses?

Yes _____ No _____

Comments: _____

Have you ever been charged been charged or convicted of a felony or misdemeanor?

Yes _____ No _____

Comments: _____

By signing this application, I further understand and authorize Camp Fernwood to conduct a thorough background check including a criminal/child abuse records check.

Date of Application: _____/_____/_____ Signature: _____

How did you hear about Camp Fernwood? _____

Please Send Your Application to:

Camp Fernwood

Ellyn Weinstein

733 Providence Rd.

Malvern PA 19355