



## Application for Employment

PO Box 381, Mount Desert, ME 04660

Phone: (207) 244-0365

Fax: (207) 244-3355

[www.campbeechcliff.org](http://www.campbeechcliff.org)

**NOTE: New applicants - Carefully complete entire application.  
Returning staff - Carefully complete pages 1, 4 & 5 only AND update other information  
on pages 2 & 3 as applicable.**

### CONTACT INFORMATION

Name \_\_\_\_\_ Date of Application \_\_\_\_\_

Any other names under which you worked or obtained your education? \_\_\_\_\_

Have you worked for Camp Beech Cliff in the past?  YES  NO If yes, give history on page 2.

Year-round Address \_\_\_\_\_  
\_\_\_\_\_

Dates at year-round address From \_\_\_\_\_ To \_\_\_\_\_

Year-round Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Social Security Number \_\_\_\_\_

Drivers License # and State \_\_\_\_\_

Other Address \_\_\_\_\_

Other Telephone Number \_\_\_\_\_

Dates at this other address and phone number From \_\_\_\_\_ To \_\_\_\_\_

The following positions at camp require that the employee be 21 years of age or older:

Coordinator  
Registered Nurse  
Van Driver

If you are applying for either of these positions, are you 21 years of age or older?  YES  NO

Are you under 18 years of age (If so, you will need the signature of a parent or guardian on all camp employment documents)?  YES  NO

Are you authorized to work in the United States?  YES  NO

Do you have a permit to carry a concealed weapon?  YES  NO

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## EDUCATION

Are you attending school currently?  YES  NO

**High School/College/Higher Education**      **Location**      **Course of Study**      **Dates/Degrees**

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## EMPLOYMENT (Please number and list most recent first)

**Agency**      **Supervisor**      **Position**      **Address**      **Phone #**      **Dates**

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## CAMP/RECREATION EXPERIENCE (As staff, volunteer or participant)

**Camp**      **Position**      **Supervisor**      **Address**      **Phone #**      **Dates**

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## REFERENCES

New applicants: List 3 references on the below lines. References will be verified.

**Name**      **E-mail Address**      **Phone #**      **Relationship**

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

## PROGRAM SKILLS

Please rank your skill/instructional ability for the following activities.

1. Those activities in which you can organize and instruct independently.
2. Those activities in which you can assist or co-instruct.
3. Those activities in which you have experience or an interest.

Leave blank those activities in which you have no interest or experience.

### OUTDOOR LIVING SKILLS

- \_\_\_\_\_ Backpacking
- \_\_\_\_\_ Fire Building
- \_\_\_\_\_ Gardening
- \_\_\_\_\_ Geocaching
- \_\_\_\_\_ Hiking
- \_\_\_\_\_ Knot Tying
- \_\_\_\_\_ Low Impact Camping
- \_\_\_\_\_ Orienteering
- \_\_\_\_\_ Outdoor Cooking
- \_\_\_\_\_ Shelters
- \_\_\_\_\_ Survival
- \_\_\_\_\_ Trip Leading
- \_\_\_\_\_ Fishing
- \_\_\_\_\_ Raft Building

### ENVIRONMENTAL EDUCATION

- \_\_\_\_\_ Astronomy
- \_\_\_\_\_ Birds
- \_\_\_\_\_ Conservation
- \_\_\_\_\_ Forest Ecology
- \_\_\_\_\_ Flowers/Trees
- \_\_\_\_\_ Insects
- \_\_\_\_\_ Marine Biology
- \_\_\_\_\_ Night Hikes
- \_\_\_\_\_ Geology
- \_\_\_\_\_ Weather
- \_\_\_\_\_ Wildlife

### SPORTS/GAMES

- \_\_\_\_\_ Archery
- \_\_\_\_\_ Tennis
- \_\_\_\_\_ Baseball/Softball
- \_\_\_\_\_ Basketball
- \_\_\_\_\_ Frisbee Golf
- \_\_\_\_\_ New Games
- \_\_\_\_\_ Parachute Activities
- \_\_\_\_\_ Soccer
- \_\_\_\_\_ Volleyball
- \_\_\_\_\_ Ultimate Frisbee

### ARTS AND CRAFTS

- \_\_\_\_\_ Batik/Tie Dyeing
- \_\_\_\_\_ Beading
- \_\_\_\_\_ Candle Making
- \_\_\_\_\_ Clay/Ceramics
- \_\_\_\_\_ Leather Craft
- \_\_\_\_\_ Nature Crafts
- \_\_\_\_\_ Painting
- \_\_\_\_\_ Juggling
- \_\_\_\_\_ Woodworking/Carving

### PERFORMING ARTS

- \_\_\_\_\_ Creative Dancing
- \_\_\_\_\_ Creative Drama
- \_\_\_\_\_ Improv
- \_\_\_\_\_ Native American History
- \_\_\_\_\_ Instrument(s)
- \_\_\_\_\_ Play Directing
- \_\_\_\_\_ Song Leading
- \_\_\_\_\_ Skits
- \_\_\_\_\_ Story Telling

### AQUATICS

- \_\_\_\_\_ Canoeing
- \_\_\_\_\_ Kayaking
- \_\_\_\_\_ Life Guarding
- \_\_\_\_\_ River Rafting
- \_\_\_\_\_ Sailing
- \_\_\_\_\_ Swimming Lessons
- \_\_\_\_\_ Water Games

### CHALLENGE COURSE

- \_\_\_\_\_ High Ropes
- \_\_\_\_\_ Low Ropes
- \_\_\_\_\_ Initiatives
- \_\_\_\_\_ Cooperative Games
- \_\_\_\_\_ Rock Climbing
- \_\_\_\_\_ Belaying
- \_\_\_\_\_ Rappelling

### MEDIA ARTS

- \_\_\_\_\_ Graphic Design
- \_\_\_\_\_ Photo Editing
- \_\_\_\_\_ Photography
- \_\_\_\_\_ Web Design
- \_\_\_\_\_ Media Software, Please list \_\_\_\_\_

### CERAMICS/POTTERY

- \_\_\_\_\_ Kiln
- \_\_\_\_\_ Potter's Wheel

## SUPPLEMENTAL QUESTIONS FOR ALL NEW APPLICANTS

Please answer, on a separate sheet of paper, the following:

1. What contribution can you make as a staff member at Camp Beech Cliff? Include why you want to work in a youth-serving setting.
- 2 Write a brief biographical sketch.
3. What should a child receive from your experience at Camp Beech Cliff?
- 4 What are your memorable moments working with children (include good and bad)?

## ALL APPLICANTS

The essential functions of the job include, but are not limited to, providing direct supervision of campers and ensuring their safety/well being. Staff must be able to manage a group of campers, to respond to emergencies, and to work in a rough terrain of 50-acres in a camp setting and need visual, auditory, and ambulatory ability to carry out job requirements.

Are you able to perform these functions?  YES  NO

If not, what accommodation would you require to perform these functions? \_\_\_\_\_

\_\_\_\_\_

## CERTIFICATIONS

Please describe any certifications or training that may be useful for a camp volunteer.

<b>Name of Certification</b>	<b>Issuing Organization</b>	<b>Expiration Date</b>
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First Aid _____		
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CPR _____		
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Water Safety Instructor _____		
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Life Guard Training _____		
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First Aid Instructor _____		
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Emergency Med Tech _____		
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Registered Nurse _____		
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Other _____		
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Special skills or qualifications that relate to work desired \_\_\_\_\_

## PREFERENCES

Type of work/position/ desired (please rank according to preference)

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

In working with children, please check your age preference. (Check top two)

\_\_\_\_\_ Ages 7 - 9      \_\_\_\_\_ Ages 12 - 13

\_\_\_\_\_ Ages 9 - 11      \_\_\_\_\_ Ages 14 - 16

For ordering staff T-shirts, please indicate size desired:  S  M  L  XL  XXL

**This Application is not complete until you have signed below and submitted the following documents:**

- Voluntary Disclosure Statement
- A separate Reference Form for each of your three listed references
- Signed Permission for Background Check (included below)

**Please read and sign:**

Camp Beech Cliff expects every Staff Member to act in a professional manner both on- and off-duty. If you have doubts about your ability to deal honestly and successfully with Camp Beech Cliff expectations, please do not commit yourself to working at Camp Beech Cliff. **All Staff Members are expected not to use illegal drugs or use alcohol in an illegal or irresponsible manner** (the legal drinking age in Maine is 21) and to avoid the possession or consumption of alcoholic beverages on Camp Beech Cliff Property except at the rare Camp Beech Cliff activity where this might be officially sanctioned. Staff Members are expected not to use tobacco products of any kind on Camp Beech Cliff property.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you and any and all information concerning my previous employers and any other information they may have, personal or otherwise, and release all parties from liability for any damage that may result from furnishing same to Camp Beech Cliff.

I understand that employment is contingent upon the satisfactory completion of a background check, reference check, and certification verification. I also understand and agree that, if hired, I will be an employee "at will". My employment may be terminated by either employer or employee at any time without any prior notice.

**Note: for an electronic signature type in name and date. I agree that submitting this application electronically has the same effect as submitting it with my signature.**

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SIGNATURE PARENT/GUARDIAN**

\_\_\_\_\_ **DATE** \_\_\_\_\_

(If applicant is under 18 years of age)