

**CAMP CEDAR FALLS  
STAFF APPLICATION**

Southern California Conference of SDA  
Youth Ministries Department  
PO Box 969  
Glendale, CA 91209-0969  
818-546-8439

<b>Office Use Only:</b>
Date Received:
1 ____ 2 ____ 3 ____ Recommendations Rec'd
Interview Date:
Contract: Sent ____ Rec'd ____

<b>Office Use Only:</b>
____ I-9
____ W-4
____ Background Check
____ Medical Consent
____ Uniform Fee
____ Work Permit

**PERSONAL**

Name: \_\_\_\_\_ Age: \_\_\_\_ Male or Female (Circle) Email: \_\_\_\_\_  
Present Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
Home Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
High School (Grade): \_\_\_\_ Year in College: \_\_\_\_ Major: \_\_\_\_\_ College/Univ. Attending: \_\_\_\_\_  
Marital Status: \_\_\_\_\_ Do you have a CA driver's license? Yes \_\_\_\_ No \_\_\_\_ If yes, license # \_\_\_\_\_  
How long have you been an SDA? \_\_\_\_ Home Church \_\_\_\_\_ Pastor \_\_\_\_\_  
Have you ever been arrested or convicted of a crime? Yes \_\_\_\_ No \_\_\_\_ If convicted, explain \_\_\_\_\_  
What commitments do you have for this summer and when? \_\_\_\_\_

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**BACKGROUND**

Is there anything that will hinder your capability to function as camp staff? (allergies, sunlight, etc.): \_\_\_\_\_  
You have my permission to contact the following individual or answer questions on my behalf in case of an emergency:  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
What other language do you speak, other than English? \_\_\_\_\_

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**CAMP EXPERIENCE**

Years employed as staff for any summer camp: \_\_\_\_ Position(s) held: \_\_\_\_\_  
List camp and director: \_\_\_\_\_  
For which position are you applying? (Please list in priority)  
1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

## Skills and Interests

(Circle: 1-interest; 2-Knowledge; 3-skill)

### Camcraft:

Backpacking 1 2 3  
 Hiking 1 2 3  
 Orienteering 1 2 3  
 Outdoor Cooking 1 2 3  
 Tent Camping 1 2 3

### Nature:

Animal Tracking 1 2 3  
 Birds 1 2 3  
 Ecology 1 2 3  
 Insects 1 2 3  
 Stars 1 2 3  
 Trees 1 2 3

### Other:

Archery 1 2 3  
 Baking 1 2 3  
 BMX Bikes 1 2 3  
 Canning 1 2 3  
 Ceramics 1 2 3  
 Cooking 1 2 3  
 Crafts 1 2 3  
 Food Service 1 2 3  
 Go-Carts 1 2 3  
 Gymnastics 1 2 3  
 Horsemanship 1 2 3  
 Indian Lore 1 2 3  
 Laundering 1 2 3  
 Nutrition 1 2 3  
 Office 1 2 3  
 Photography 1 2 3  
 Basic First Aid 1 2 3  
 CPR \_\_\_\_\_  
 Class B License \_\_\_\_\_

### Music:

Camp Songs 1 2 3  
 Song Leader 1 2 3  
 Special Music 1 2 3

### Programming:

Art, Postermaking 1 2 3  
 Audio/Visual 1 2 3  
 Counseling 1 2 3  
 Devotional Talks 1 2 3  
 Group Games 1 2 3  
 Skits 1 2 3  
 Special Events 1 2 3  
 Storytelling 1 2 3

### Instruments:

\_\_\_\_\_  
 \_\_\_\_\_

### Maintenance:

Auto Mechanics 1 2 3  
 Carpentry 1 2 3  
 Electrical 1 2 3  
 Janitorial 1 2 3  
 Plumbing 1 2 3  
 Welding 1 2 3

### Waterfront:

Water Skiing 1 2 3  
 Boat driver 1 2 3  
 Canoeing 1 2 3  
 Swimming 1 2 3  
 W.S.I. \_\_\_\_\_  
 Senior Life Saving \_\_\_\_\_

Other Skills and interest we should know about:

\_\_\_\_\_  
 \_\_\_\_\_

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## Recommendations

Please list the individuals who will be sending in your recommendation Forms:

1. Name \_\_\_\_\_ Position \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

2. Name \_\_\_\_\_ Position \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

3. Name \_\_\_\_\_ Position \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_