

GENESEE VALLEY ROTARY CAMP
“HERE IS LOVE”
STAFF APPLICATION

Name: _____ Sex: M / F D.O.B.: _____

Permanent Address (If college student, please list Home address)

Street: _____, City: _____

State: _____ Zip: _____ Phone: _____

Soc. Sec. #: _____

E-Mail: _____

Years of completed education, as of August 1st of this year. (Please circle)

High School: 1 2 3 4 College: 1 2 3 4 Grad.

Vocational Training: YES / NO If yes, what type: _____

College major/degree(s) (if applicable): _____

Present Job Status: _____

How did you hear about GVRC?

Why are you interested in working at GVRC?

What do you hope to gain from working at this camp?

What previous experience(s) have you had working with individuals that have disabilities?

What are your interests?

Other personal experiences you've had that would benefit you as a GVRC staff member:

Previous camp/camping experience(s): _____

Any physical limitations or health concerns? YES / NO

If YES, Please describe: _____

Special Talents / Awards? _____

List any certifications you hold (i.e. CPR, First Aid, Lifeguarding): _____

Are you applying for a specific position at camp? YES / NO

If YES, What? _____

If NO, are you willing to accept any position? YES / NO

If NO, please explain: _____

Have you ever been convicted of a crime, including a sex related or child abuse related offense?

YES / NO -- If yes, please specify: _____

REFERENCES:

The attached forms must be completed and returned for all applications. Choose two (2) references that are aware of your employment record or if not employed, you may choose character references (non-family members only). Although not required, one preferred reference is someone associated with GVRC or Rotary International. The forms may be returned with this application or may be sent directly to the camp director.

Applications will not be considered complete until both references are received.

Reference #1: _____ Phone: _____

Reference #2: _____ Phone: _____

NOTE: A rule that is strictly enforced at GVRC, is that no staff member may consume alcohol or use non-prescribed medications or illegal drugs during the week of camp. This rule is to ensure the safety of all our campers. Any staff member in violation of this rule will be asked to leave the camp immediately.

Having read the above statement and having answered all of the questions accurately and honestly, I submit this application. My signature below also indicates my consent for necessary legal background checks required for my employment as a staff member at GVRC.

Signed: _____ Date: _____

Return to: Camp Director - Brian Bartalo, 233 Hollybrook Road, Brockport, NY 14420