



2010 Cali-Camp
SR. / ASST. STAFF Re-Application



Name: Last, First Age: (as of 1st day of camp) Birthdate / /

Current Address City, State, Zip code Telephone Number

Driver's License # State Expiration Date / /

E-mail Address: Facebook Address:

Summer Address (if different) City, State, Zip code Cell Phone Number

T-shirt Size? (circle) S M L XL XXL XXXL

I attend (school / college) Fall semester begins (please complete)

MUST COMPLETE: (to be considered)

I can work of the 9 WEEKS. June through August My last Day: M T W H F Week #

If less than 9 weeks - please explain::

Since last summer I have held a child-related position that will affect my summer salary at:

How many hours per week? How many weeks? Comments:

All experience must be verified prior to the start of camp. You may go onto our website and download employment verification form - Voluntary Disclosure Statements (Each year, please answer all statements and sign following)

1. Have you ever been convicted of any crime of violence against minors, including but not limited to those listed below? []Yes []No

- Indecent assault and battery on a child under fourteen
-Indecent assault and battery on a mentally retarded person
-Indecent assault and battery on a person who has obtained the age of fourteen
-Indecent photographic exposure
-Rape
-Rape of a child under sixteen with force
-Assault with intent to commit rape
-Kidnapping of a child under sixteen with intent to commit rape
-Distribution and trafficking of narcotics or other controlled substances
-Intent to commit any of the above crimes.

If yes, please explain: (Use a separate sheet to explain)

2. 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 to explain)

3. Are you subject 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 to explain)

4. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children? []Yes []No

If yes, please explain: (Use a separate sheet to explain)

I understand that:

- a. Cali-Camp may deny employment to any person who answers any of the questions numbered 1-4 above in the affirmative.
- b. In applying for a camp position the information which I have furnished on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.
- c. Cali-Camp may terminate employment or volunteer service of any person:
 - 1) found to have a history of complaints of abuse of a minor and/or
 - 2) found to 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.
- d. This disclosure statement must be updated yearly.

Signature: _____ Date: ____/____/2010

CAMP POSITIONS

Please READ & FOLLOW - INDICATE 1st & 2nd CHOICE of desired positions * (with a ① or ②):

* (see listing of available positions & requirements of each before applying)

- [] ASSISTANT STAFF MEMBER (Qualify with 16 yrs of age)
- [] 2nd Year ASSISTANT STAFF MEMBER (1 year completed as Assistant Staff @ Cali-Camp)
- [] DAY CAMP (Coed) CO - COUNSELOR Coed: Age 4:00 – 4.11 Coed: Age 5.0 - 5.11 ____
Coed: Ages 12 / 13 ____
- [] DAY CAMP CO-COUNSELOR Age 6 ____, Age 7 ____, Age 8 ____,
[]Boys []Girls Age 9 ____, Age 10 ____, Age 11 ____,
- [] DAY CAMP COUNSELOR Age 6 ____, Age 7 ____, Age 8 ____,
[]Boys []Girls Age 9 ____, Age 10 ____, Age 11 ____,
- [] WRANGLER CAMP COUNSELOR Coed: Ages 6 / 14 ____.
- [] SPORTS CAMP INSTRUCTOR / COUNSELOR Coed: Ages 6 / 14 ____.
- [] C.I.L.T. LEADERSHIP SPECIALIST Coed: Ages 12 / 13 ____.
- [] SPECIALTY AREA: _____

SUPERVISORY POSITIONS:

- [] TEAM LEADER - PROGRAM (2)
- [] INCLUSION COORDINATOR [] JR. STAFF – TEAM LEADER
- [] SR. STAFF - TEAM LEADERS (3)

TRANSPORTATION / PRE-POST IN-CAMP SUPERVISION POSITIONS

Everyone at camp participates in one form of transportation or another whether it be driving a school bus/van, supervising on a school bus/van or pre / post supervisor (in-camp). **All driving & supervising positions must be filled first before non-driving positions.** All persons indicating driving positions will get first priority and consideration for camp positions. Insurance requirement - You must be 18 years of age to drive for Cali-Camp. We provide re-imbursement for your physical, license and training.

PLEASE INDICATE CHOICE OF POSITION and route length (A,B,C or D) (see transportation salary sheet for explanation): There is no guarantee that you will get your exact choice. Transportation Director has the final say in all routing matters.

I am re-applying as a School Bus/Van Driver

CHOICE OF ROUTE LOCATION: _____ 1st choice []A []B []C []D
CHOICE OF ROUTE LOCATION: _____ 2nd choice []A []B []C []D

Comments: _____

I am re-applying as a School Bus/Van Counselor

CHOICE OF ROUTE LOCATION: _____ 1st choice []A []B []C []D
CHOICE OF ROUTE LOCATION: _____ 2nd choice []A []B []C []D

Comments: _____

I am re-applying as a Pre / Post In-Camp Supervisor (before camp: 8:30 - 9:15 and
after camp: 3:15 - 4:00 daily).

I am not re-applying as a Driver or Bus Counselor
Because

► Non-driving / non-supervising positions are few and far between and understand that all driving and supervising positions must be filled first before non-driving positions.

Please take a few minutes to complete the following statements:

What is it that keeps you coming back to Cali-Camp? _____

If I could share one camp memory with others I would share the time when _____

What have you personally gained from working at Cali-Camp? _____

I authorize investigation of all statements contained in this re-application. I understand that misrepresentation or omission of facts is cause for immediate dismissal. I have read and understand all statements relating to the voluntary disclosure statements listed on the second page.

Signature

____/____/2010
Date

*** RETURN BY January 30th**

**to: Cali-Camp Staff Winter / Spring Office
39-103 Desert Greens Dr. East
Palm Desert, CA 92260**

**Winter / Spring Staffing Phone and Fax #: (760) 836-3894
Email addresses: staff@calicamp.com or pam@calicamp.com**