

Whitehall Camp & Conference Center

Counselor Application

Section 1: Basic Information

Name: _____ Date: _____ Birth Date: _____ Age: _____
Home Address: _____ City: _____ State: _____ Zip: _____
Home Phone: (____) _____ Cell Phone: (____) _____
E-Mail _____ Marital Status: _____ Male _____ Female _____

Section 2: Questions regarding the specifics of Counseling

Which camp do you wish to be a part of? (You may work in more than one camp per summer)

- 3rd -5th Grade Camp 6th -8th Grade Camp 9th -12th Grade Camp
 Winter Blast (Jr/Sr High) Winter Blast (3rd - 6th Grade)

Which position are you applying for? (CIT – ages 15 & 16, Counselors – ages 17+)

- Counselor CIT (Counselor in Training, will be with a Counselor)

Would you like to be considered for head counselor? Yes No

List any physical limitations or medical problems that might affect your job.

Are you presently taking any prescriptions or over the counter medicine? If so, please identify and the reason for taking it:

Section 3: Spiritual Life

Are you a Christian? Yes or No

If yes, are you living in harmony with the Biblical teachings in regards to your lifestyle? Yes Unsure No

What church do you attend and how often?

Your Pastors Full Name?

List the church activities that you are involved with that would enhance your qualifications as a counselor.

Please complete the above section as honestly as you can. The Camp Director will consider your Christian experience and relationship with Jesus Christ as a priority in using you as a volunteer counselor. We desire individuals who are grounded strongly in their faith and who will best minister to the children and youth that attend Camp.

Section 4: Camping Experience

List previous counseling or staff experience (year, position, and director)

List any Youth Camp Training (i.e. workshops, C.I.T., etc.)

List camping/counseling experience at Whitehall Camp

List years that you have attended a camp (Location & year)

Section 5: What are your gifts and talents: (Please check any that apply)

- Counseling Children Leadership Ability Teaching Administration
- Organization "Up Front" style of person Patience Arts & Crafts
- Life Saving Skills Team worker Comedy/Humor Singing Talent
- CPR Training First Aid Certificate Devotion Leading Creativity
- Alter work/spiritual counseling Sharing of Testimony Athletic Ability Adaptability
- "Behind the scenes" person Camping/hiking/nature Disciplinarian Drama/Puppetry
- Play an instrument - What? _____ Supervisory skills

Section 6: References

Pastoral Recommendation: I concur with this persons relationship with Jesus Christ and feel that they would do an excellent job as a counselor at Whitehall Youth Camp.

Pastors Name _____ Pastors Signature: _____

Please list an additional reference other than your pastor or a family member

Name: _____ Home Phone: () _____

Home Address: _____ City: _____ State: _____ Zip: _____

Relationship: _____

Section 7: Counselor Commitment Statement

If accepted as a counselor or CIT, "I will attend planned Pre-Camp Orientation and training sessions: study any curriculum or lessons provided to me, uphold camp regulations and standards, and pledge my support to the Camp directors Leadership. I will also begin to pray for the camp and allow the Holy Spirit to work through me during camp as I endeavor to give my best to campers under my charge."

Applicants Signature: _____ Date: _____

Please address applications as well as comments or questions to:

Whitehall Camp & Conference Center
580 Whitehall Road
Emlenton, PA 16373

Phone: 724-867-6861
E-mail: amy@whitehallcamp.org
Website: www.whitehallcamp.org

Fax: 724-867-0053

Confidential

Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ DOB: _____

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize Whitehall Camp & Conference Center and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to Whitehall Camp & Conference Center or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

Whitehall Camp & Conference Center and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature: _____ Date: _____

Notice to California, Minnesota and Oklahoma Residents:

Please check the box below if you wish to receive a copy of a consumer report that is requested.

I wish to receive a copy of any Background Check Report on me that is requested.

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Previous Address From: _____
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(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ DOB: _____

Telephone Number: _____

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