

Application Packet

Camp Y-Owasco Auburn YMCA-WEIU

Instructions: Please complete all forms in this packet and answer all questions. For questions and additional information, contact the Camp Director at joe@auburnymca.net or (315) 253-5304, ext. 115. Please follow instructions on reference forms.

Return completed applications to:

Joe Murphy, Camp Director
Auburn YMCA-WEIU
27 William Street
Auburn, New York 13021

Additional forms can be found at www.y-owasco.org/employment.html or at the Auburn YMCA-WEIU front desk.



We build strong kids, strong families, strong communities.

We take child abuse prevention seriously.

Application for Employment Camp Y-Owasco Auburn YMCA-WEIU

**PLEASE NOTE: THIS IS NOT THE COMPLETE APPLICATION.
APPLICANTS MUST ALSO FILL OUT AN AUBURN YMCA GENERAL APPLICATION
ON FOLLOWING PAGES**

First and Last Name: _____ Date: _____

1. Camp Position Applying for (please circle):

1. Senior Counselor (must be at least 18 years old)
2. Junior Counselor (must have been a CIT)
3. Leadership Director (must at least 21 years old)
4. Waterfront Director (must be at least 21 years old)
5. Program Director (must be at least 21 years old)
6. Food Service Director/Camp Cook (must be at least 21 years old)
7. Medical Director (must be at least 21 years old)

2. If applying for a counselor position, please rank the activities below from 1 to 3 based on your interest and ability to teach them. 1 = No experience, willing to learn; 2 = some experience, able to assist instruction; 3 = Lots of experience, able to teach.

___ Soccer	___ Softball	___ Volleyball	___ Flag-Football
___ Lacrosse	___ Frisbee	___ Archery	___ Arts & Crafts
___ Sailing	___ Canoeing	___ Kayaking	___ Nature
___ Drama	___ Dance	___ Swimming	___ Waterskiing
___ Singing	___ Outdoor Living Skills	___ Challenge Course.	

Any other activities or skills that you'd be qualified to teach and facilitate: _____

3. Please rank the age groups you would like to work with on a scale of 1-4. 1 is lowest and 4 is highest.

_____ 8 – 9 _____ 10 – 11 _____ 12 – 13 _____ 14 – 15

3. What is your swimming ability? (Circle one)

Non-swimmer

Intermediate

Good

Excellent

4. Have you had any previous group leadership experience (i.e. camp, scouts, clubs, etc)? If yes:

Name of organization _____ Position held: _____

Date (s) _____

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Date (s) _____

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Date (s) _____

5. Do you have any certifications that might be useful for a camp position*?

___ CPR (Level: _____) Expiration date _____

___ Lifeguarding (Cert. Org: _____) Expiration date _____

___ W.S.I. Expiration date _____

___ First Aid (Level: _____) Expiration date _____

___ Other _____

***Please attach a copy of your certification card for any certification documents you may have.**

6. State any additional information you feel may be helpful to us in considering your application:

Please turn page over to complete application.

7. Please answer the following questions thoughtfully. Feel free to attach additional paper as necessary!

1.) Why do you want to work at Camp Y-Owasco this summer?

2.) Describe how you are a role model and use the values of caring, honesty, respect, and responsibility in your everyday life? *Please provide at least one example.*

3.) Please name some of your hobbies and interests.

4.) If you could have any superpower, what would it be? Why?



EMPLOYMENT HISTORY

Begin with your present or last job. Include any military service and volunteer activities.
(Exclude groups which indicate race, color, religion, sex, age, national origin or other protected group.)

Employer 1	Dates Employed From To	Job Duties
Address		
Job Title	Hourly Rate/Salary Starting Final	Reason for leaving
Immediate Supervisor Phone #		
Employer 2	Dates Employed From To	Job Duties
Address		
Job Title	Hourly Rate/Salary Starting Final	Reason for leaving
Immediate Supervisor Phone #		
Employer 3	Dates Employed From To	Job Duties
Address		
Job Title	Hourly Rate/Salary Starting Final	Reason for leaving
Immediate Supervisor Phone #		
Employer 4	Dates Employed From To	Job Duties
Address		
Job Title	Hourly Rate/Salary Starting Final	Reason for leaving
Immediate Supervisor Phone #		

REFERENCES

Give the names of three persons not related to you whom you have known at least one year.

NAME	ADDRESS/PHONE	OCCUPATION	YEARS KNOWN
1			
2			
3			

PLEASE READ AND SIGN BELOW

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL MY STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES OR SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE."

SIGNATURE

DATE

AUBURN YMCA-WEIU
Camp Y-Owasco

STAFF REFERENCE FORM

To Staff Applicant:

1. Enter your name on line below, along with other information asked for.
2. Give this form to your reference with a Stamped envelope addressed to:
Joe Murphy, Camp Director
Auburn YMCA-WEIU
27 William St.
Auburn, NY 13021

To the Person Completing Form:

The applicant named below wishes to be employed at the Camp Y-Owasco and asks that you help us by checking under the heading that most nearly describes him/her. Feel free to make additional notes on the back of the form. The reference will be confidential. Your prompt and helpful response is appreciated.

Applicant Name _____

Position Applying For _____

Is the applicant:	Not Observable	Above Average	Average	Below Average
1. An excellent role-model for kids to emulate?				
2. Reliable?				
3. Flexible, able to shift program direction on short notice?				
4. Loyal, supports both verbally and in action his/her peers and employer?				
5. Stamina: Can he/she work long hours at peak performance?				
6. Able to complete assigned work, follow through with attention to detail?				
7. Independent: Completes work without supervision?				
8. Neat in personal appearance?				
9. Have a reputation for honesty and integrity?				

If you were a parent, would you be happy to have this person as your child's caregiver? _____

Signature _____ Date _____ Title _____

Organization, School, or Company _____

Address _____ Phone _____

Please list on the back any additional comments. Information about the candidate's interests, experience/skills in working with children will be helpful.

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