

Camp Agawam

September 1st to May 31st
 Phone: (207) 892 – 1200
 Fax: (207) 892 – 1220

54 Agawam Road
 Raymond, ME 04071
www.campagawam.org

June 1st to August 31st
 Phone: (207) 627-4780
 Fax: (207) 627-8003

2011 VOLUNTEER APPLICATION

Camp Agawam is an equal opportunity employer. No aspect of employment will be influenced by race, color, religion, sex, age, national ancestry, assertion of claims under the Maine Whistleblowers or Human Rights Act, or disability unrelated to the termination of employment

Date of application: _____

GENERAL INFORMATION:

First name: _____ Middle name: _____ Last name: _____

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

Home Phone: _____ Cell Phone: _____

School Address (if you live at school): _____ City: _____ State: _____ Zip: _____

Email: _____ Please Indicate (*) your best mailing address from now until June 1, 2011.

License Number: _____ Issuing State: _____

I am available for the Main Idea at Camp Agawam 2011 from Friday **June 18, 2011 at 8:15pm to Friday June 24, 2011 at 7:00pm**:

YES NO; If NO, actual dates available: _____

AND/OR I am available during the 92nd Season between **June 29, 2011 to August 16, 2011**: YES NO;

Specifically _____ to _____

EDUCATION:

YEARS	SCHOOL / COLLEGE / UNIVERSITY	MAJOR SUBJECTS	DEGREE GRANTED

PAST EMPLOYMENT:

DATES	EMPLOYER	SUPERVISOR	POSITION	PHONENUMBER	REASON YOU LEFT

CAMP EXPERIENCE:

DATES	CAMP NAME	CAMP ADDRESS	DIRECTOR'S NAME	CAMPER or STAFF

REFERENCES – List 3 people who have knowledge of your character, experience, and abilities (At least one must be a current or past employer / supervisor and they cannot be relatives or **full-time Camp Agawam Employees**):

NAME	ADDRESS	PHONE NUMBER

VOLUNTARY DISCLOSUR STATEMENT:

1. Have you ever been convicted of any crime related in any manner to children and/or your conduct with them?

[] YES [] NO INITIAL: _____

If yes, please explain (use a separate sheet if needed):

2. Have you ever been convicted of any crime including, but not limited, to those listed below and/or any crime similar in any manner to those listed below? [] YES [] NO INITIAL: _____

- 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
- Rape
- Rape of child under sixteen with force
- Assault with intent to commit rape
- Kidnapping of a child under sixteen with the 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 if needed):

3. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children?

[] YES [] NO INITIAL: _____

If yes, please explain (use a separate sheet if needed):

4. Are you now or have you ever been 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 INITIAL: _____

If yes, please explain (use a separate sheet if needed):

5. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children?

[] YES [] NO INITIAL: _____

If yes, please explain (use a separate sheet if needed):

6. Have you ever been convicted of a crime, other than a minor traffic offense (a prior conviction is not an automatic bar to employment. The type of conviction and when it occurred will be evaluated by the camp before any decision is made)?

[] YES [] NO INITIAL: _____

If yes, please explain (use a separate sheet if needed):

7. The camp's policy is to prohibit all forms of harassment by our employees. This includes sexual, racial, religious, and other forms of harassment. Have you ever been accused of harassment of any person including, but not limited to, workplace harassment (a prior accusation is not an automatic bar to employment. The type of accusation and when it occurred will be evaluated by the camp before any decision is made)? [] YES [] NO INITIAL: _____

If yes, please explain (use a separate sheet if needed):

VOLUNTARY DISCLOSURE STATEMENT CONTINUED:

I understand that:

8. The camp may deny employment to any person who answers **“yes” to any one of the above voluntary disclosure questions (questions 1-7)**. If hired and the employer later discovers circumstances that would indicate a “yes” answer to any of the above questions, employment may be terminated immediately. [] YES [] NO INITIAL: _____
9. That all employees are expected to follow all of Agawam Council’s written Personnel Policies and Practices. [] YES [] NO INITIAL: _____
10. The information provided on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers. [] YES [] NO INITIAL: _____
11. The camp may terminate employment or volunteer service of any person if that person is found, regardless of when discovered, to:
 - a) have a history of complaints of abuse of a minor;
 - b) 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; and/or
 - c) have falsified or omitted information in this disclosure statement.
 [] YES [] NO INITIAL: _____
12. This disclosure statement must be updated yearly. [] YES [] NO INITIAL: _____

CONDITIONS OF EMPLOYMENT:

- I affirm that an Agawam staff member’s over-riding priority, and reason to apply for staff work, is the care, guidance and counseling of our campers. [] YES [] NO
- I realize that the use or possession of alcohol and tobacco products on Agawam property can lead to dismissal. [] YES [] NO
- I am willing to commit to Agawam’s 1:00am curfew and 1:30am in cabin rule. [] YES [] NO
- I realize that Agawam Council policy forbids the use or possession of illegal drugs, while on-duty or off, during the term of my employment and that violation of this policy can lead to dismissal. [] YES [] NO

ACTIVITY PREFERENCES (all staff members teach activities and most live in cabins with campers):

Activities - Mark “1” for activities you can lead, organize, and teach;
Mark “2” for activities in which you have some experience & can help others in teaching:

Adventure / Challenge

- ___ Low Ropes Course
- ___ High Ropes Course
- ___ Belaying
- ___ Large Group Games

Music

- ___ Directing Singing Groups
- ___ Bugle
- ___ Piano
- ___ Guitar

Waterfront

- ___ Canoeing
- ___ Diving
- ___ Swimming
- ___ Sailing
- ___ Racing Sailing
- ___ Snorkeling
- ___ Windsurfing
- ___ Rowing
- ___ Swim Team
- ___ Lifeguarding
- ___ Kayaking

Sports

- ___ Archery
- ___ Baseball
- ___ Basketball
- ___ Riflery
- ___ Soccer
- ___ Tennis
- ___ Lacrosse
- ___ Frisbee
- ___ Sports Training
- ___ Volleyball
- ___ Track

Creative

- ___ Arts & Crafts
- ___ Photography
- ___ Darkroom
- ___ Newspaper
- ___ Play Directing
- ___ Acting
- ___ Skits & Stunts
- ___ Woodworking

Campcraft

- ___ Outdoor Living Skills
- ___ Hiking
- ___ Overnight Camping
- ___ Leading Extended Trips (10-14 days)
- ___ Nature
- ___ Astronomy
- ___ Fishing

Instructor Certification can be provided in Canoeing, Sailing, Swimming, Archery, Riflery, and Ropes for experienced candidates

ACTIVITY PREFERENCES – list, in order of interest, three activities you would most like to teach in 2009:

1. _____ 2. _____ 3. _____

CURRENT CERTIFICATIONS & QUALIFICATIONS - Please check your certifications and write in expiration dates net to each category:

<input type="checkbox"/> American Red Cross Lifeguard (LGT) expires: _____	<input type="checkbox"/> Archery Instructor expires: _____
<input type="checkbox"/> American Red Cross Lifeguard Instructor (LGI) expires: _____	<input type="checkbox"/> Ropes Course Instructor expires: _____
<input type="checkbox"/> American Red Cross Water Safety Instructor (WSI) expires: _____	<input type="checkbox"/> Riflery Instructor expires: _____
<input type="checkbox"/> Wilderness First Aid (WFA) expires: _____	<input type="checkbox"/> EMT expires: _____
<input type="checkbox"/> Standard First Aid expires: _____	<input type="checkbox"/> WEMT expires: _____
<input type="checkbox"/> American Red Cross CPR expires: _____ expires: _____	
<input type="checkbox"/> Certified Referee/Official: _____ expires: _____	
<input type="checkbox"/> Other: _____ expires: _____	

ADDITIONAL RESPONSIBILITIES – Please consider me for the following positions:

<input type="checkbox"/> Pre-Camp Worker	<input type="checkbox"/> Maintenance Work	<input type="checkbox"/> Main Idea Telegraph
<input type="checkbox"/> Post-Camp Worker	<input type="checkbox"/> Photography	
<input type="checkbox"/> Office / Archiving Work	<input type="checkbox"/> Campfire Talents: _____	

Position Applying for (as at 6/12/2011): 18+
 21+
 21+ Driver

I authorize investigation of all statements herein and release *Agawam Council, d/b/a Camp Agawam*, and all others from liability in connection with same. I understand that, if employed, I will be an at-will employee and that any agreement to the contrary must be in writing and signed by the director of the camp. I also understand that untrue, misleading, or omitted information herein may result in dismissal, regardless of the time of discovery by the camp.

SIGNATURE OF APPLICANT: _____ DATE: _____

PRINTED APPLICANT NAME: _____

PARENT SIGNATURE (if under 18 yrs.): _____ DATE: _____

PRINTED PARENT NAME (if under 18 yrs.): _____

all statements become part of any future employee personnel files

Please return to Erik Calhoun, DIRECTOR:
CAMP AGAWAM, 54 AGAWAM ROAD, RAYMOND, ME 04071
Phone: (207) 892-1200 Fax: (207) 892-1220
chiefc@campagawam.org